11/24/21

DC 10-1

STATE OF MICHIGAN

IATURAL RESOURCES COMMISSION

CARL T. JOHNSON
Chairman
E. M. LAITALA
AUGUST SCHOLLE
HILARY F. SNELL
HARRY H. WHITELEY



WILLIAM G. MILLIKEN, Governor

DEPARTMENT OF NATURAL RESOURCES

STEVENS T. MASON BUILDING, L'ANSING, MICHIGAN 48926

BALPH A. MAC MULLAN, Director

4056 Plainfield Avenue, N. E. Grand Rapids, Michigan 49505

November 24, 1971

WATER RESOURCES COMMERCION

STANLEY QUACKENBUSH

JOHN H. KITCHEL, M.D.

RALPH A. MAC MULLAN

JOHN E. VOGT

JOHN P. WOODFORD

GEORGE F. LIDOLE

ALVIN R. BALDEN

Stevick Landfill _ P. O. Box 22 Albion, Michigan

Dear Mr. Stevick:

I understand that Mr. Hadfield of the state health department requested a letter from our agency acknowledging use of your landfill for certain centrifuged industrial wastes. Specifically, the waste in question comes from Union Steel Products, which provides chemical treatment for destruction of cyanide and treatment of metals. The metals make up the sludges as insoluble hydroxides and carbonates, etc.

In order to make it possible to take the waste to landfill sites, two centrifuges are employed to dewater the sludge to 30-40% solids. The sludge has a consistency of "toothpaste." For the past several months, this waste has been placed in a specified place on your private landfill. The location is isolated, away from the area where private parties have access for trash disposal.

We have felt the disposal of adequately treated matallic sludges in the centrifuged state to be an improvement over the hauling of wet wastes. Our observations indicate this has been satisfactory. It does place a responsibility on Union Steel Products to make sure the sludges are as dry as possible, and that the method of dumping does not make the area unusable.

We believe this is an appropriate use. The only change that might be considered would be a special area in the landfill site for this waste only. Experience would have to show that this improvement is necessary.

Very truly yours,

WATER RESOURCES COMMISSION

Chester Harvey.

Chester Harvey, Basin Engineer

MICHIGAN DEPARTMENT OF PUBLIC ALTH DIVISION OF ENGINEERING

TO: Michigan Department of Public Health Division of Engineering 3500 North Logan Street Lansing, Michigan 48914

| DO NOT WRITE IN THIS SPACE |
|---|
| Bonding Co. THE AETNA CASUALTY AND SURFTY COMPANY |
| Agent MARY B. SMITH |
| Address JACKSON, MICHIGAN |
| License No. 1023 |
| Bond Value \$2,500,00 |
| Loc. Code |
| |

| | Loc. (| Code | <u> </u> | |
|---|-------------------------------|-----------------------|---|--------------------|
| | | | | |
| | OR SOLID WASTE DIS | | ENSE | |
| . () | e back of last copy for it | | | |
| X new | (Fill out in triplic | ate) // addition | | |
| Application is hereby made to the Director, Michigarea under the provisions of Act 87, P.A. 1965. | | | cense to operate a so | lid waste disposal |
| Date May 13, 1966 | | • | | |
| | | | 4. | |
| NAME OF DISPOSAL AREA Albion-Sheride | gn Township Land | Fill S | size 26 acreas | |
| LOCATION Calkoun | Sheridan Towns | ship | • | 36 |
| (county) | (city, v | iliage or township) | | (section) |
| HIZKMAKKI PKWKYAKKAK | XXXX 29951 Div | ision Drive | | |
| (address or additional loc | | | · ···································· | |
| | | | | |
| | | | | |
| NAME OF PROPERTY OWNER Gordon D. (individual, firm, tow | Stevick Addres | s 424 Pattie A | ve., Jackson, Mi | chigan 49201 |
| | | | (include zip code) | _ ,, |
| NAME OF OPERATOR Arlow Wilkinson | Addres | s House trailer | at dump site | |
| | | | (include zip code) | |
| RESPONSIBLE PERSON TO CONTACT Mr. | Gordon D. Stevic | | | |
| 181 | (if other than opera | • | | |
| Address424 | Pattie Avenue, | | an 49201 | |
| <u></u> | (include zip cod | | | |
| TYPE OF DISPOSAL OPERATION: (If more than | | | on for each) | |
| 🗓 Sanitary Landfill | ∐ Hog Fe | - | | |
| Incineration | Other_ | · · · · · | | (specify |
| TYPE OF MATERIAL HAND LED: (check one or | | | | |
| | | | Rubbish | Other |
| FEE: The required annual license fee of \$25.00 | | ot attached. | | (opecily) |
| (governments and agencies | | • | | |
| BOND: The power of attorney and bond in the a | | j is attached. | | |
| (bond of \$500.00/acre, mini | mum bond \$2500.00) | | | |
| | | | | |
| I hereby certify that the foregoing information is a | ccurate and complete | / | | |
| Man don to | 1) Store | A 1944 | | |
| PADVIONE (I | ignature and title of applica | int) | | |
| Any disposal operation possibly involving the use | of the waters of the ! | State also requires t | he submission of a ne | w or increased use |
| statement to the Water Resources Commission as p | | | | |
| | | 3.61.3. | dilanti in the | |
| Acknowledgment of receipt of annual \$25.00 licens | se fee | Leave T | his Space Blank | |
| received by me on | | iggs = seeds as | . vi | |
| | | EXAMIN | OVIL | |
| May 13, | _19 <u>_6</u> 6 | | | |
| L'ATBALOY) | 1 1 | TOTAL JUN 3 | 3 1966 | 1 |
| Signature Arth Sten | | Durit don't | | |
| | | | THE RESERVE | |
| Title Sandarlan | | | EN CHART | |
| D65.2 - 2M - 1/66 | | | District of | |

MICHIGAN DEPARTMENT OF PUBLIC HEALTH DIVISION OF ENGINEERING

| TO: | DO NOT WRITE IN THIS SPACE |
|--|--|
| _ · · · · · · · · · · · · · · · · · · · | Bonding Co. |
| Michigan Department of Public Health | Agent |
| Division of Engineering | Address |
| 3500 North Logan Street | License No. |
| Lansing, Michigan 48914 | Bond Value |
| | Loc. Code |
| | |
| APPLICATION FOR SOLII | D WASTE DISPOSAL AREA LICENSE |
| | ast copy for instructions) |
| | out in triplicate) |
| | renewal addition |
| , | tment of Public Health, for a license to operate a solid waste disposal |
| area under the provisions of Act 87, P.A. 1965. | |
| Date8/12/66 | · |
| · | |
| NAME OF DISPOSAL AREA Albion-Sheridan Towns | SIZC |
| Calhaun | (acres) |
| LOCATION Calhoun (county) | Sheridan Township 36 (city, village or township) (section) |
| 29951Division Dri | • • • • |
| (address or additional location descri | |
| | · |
| Combo B Combo | (0) Partie A. Talan Waling (00) |
| NAME OF PROPERTY OWNER Gordon D Stevick | Address 424 Pattie Ave. Jackson, Michigan 4920 |
| Aulan Hilkingan | Unice Trailor at site |
| NAME OF OPERATOR | Address |
| Gordon Gordon | D. Stevick |
| | other than operator) |
| Address 424 Pattie Ave Jackson, Michig | |
| | (include zip code) |
| TYPE OF DISPOSAL OPERATION: (If more than one area | involved file separate application for each) |
| 🔯 Sanitary Landfill | ☐ Hog Feeding |
| Incineration | Other(specify |
| TYPE OF MATERIAL HAND LED: (check one or more) | · · · · · · · · · · · · · · · · · · · |
| | Waste 🗌 Liquid Waste 🛛 Rubbish 🔲 Other |
| FEE: The required annual license fee of \$25.00 \ is | is not attached. |
| (governments and agencies thereof ex | |
| BOND: The power of attorney and bond in the amount of | |
| (bond of \$500.00/acre, minimum bond | \$2500.00) |
| · · · · · · · · · · · · · · · · · · · | |
| I hereby certify that the foregoing information is accurate ar | d complete |
| XX mdin 1) 16 | mel |
| (algnature and | title of applicant) |
| Any disposal operation possibly involving the use of the w | aters of the State also requires the submission of a new or increased us |
| statement to the Water Resources Commission as provided b | |
| • | |
| Acknowledgment of receipt of annual \$25.00 license fee | Leave This Space Blank |
| received by me on | |
| O(8/12) $O(8/12)$ | |
| 19_00 | |
| Casko HY VOLAGA | |
| Signature | |
| Title Sanitarian | |
| | · · · · · · · · · · · · · · · · · · · |

D65.2 - 2M - 1/66

MICHIGAN DEPARTMENT OF PUBLIC HEALTH

| D | IVISION OF ENGINEERING |
|---|---|
| TO: | DO NOT WRITE IN THIS SPACE Reading Co. The AEtna Casualty and Surety Company |
| Michigan Department of Public Health | Bonding Co. Mary B. Smith |
| Division of Engineering | Address Jackson, Michigan |
| 3500 North Logan Street | Address 2577 |
| Lansing, Michigan 48914 | License No. 2377 Read Value \$2,500.00 |
| Constity, Michigan 40914 | Bond Value |
| | Loc. Code |
| APPLICATION FO | DR SOLID WASTE DISPOSAL AREA LICENSE |
| (See | back of last copy for instructions) |
| • | (Fill out in triplicate) |
| now . | 🔀 renewal 🔲 addition |
| Application is hereby made to the Director, Michiga | an Department of Public Health, for a license to operate a solid waste disposal |
| area under the provisions of Act 87, P.A. 1965. | |
| 11/2/2 | |
| Date Sept 13 | |
| | |
| NAME OF DISPOSAL AREA | Sheredur Size app 13 dues |
| LOCATION Colhoun | Sheredam tup |
| (county) | (city, village or township) (section) |
| 29975 E. Z | sussion of allown Wish |
| (address or additional locat | tion description) |
| | Street Address 424 Patter Rev Corpson 49202 |
| NAME OF PROPERTY OWNER Jindividual, firm, towns | CALCON MUNICOS AND |
| | |
| NAME OF OPERATOR MILLOW WILLIAM | Address 29973 E. Dellesson Illuon (include zip code) |
| | (menue zip code) |
| RESPONSIBLE PERSON TO CONTACT | (if other than operator) |
| | (a. c.m. dian operator) |
| Address | (include zip code) |
| | |
| | one area involved file separate application for each) |
| 🔀 Sanitary Landfill | Hog Feeding |
| Incineration | Uther(specify |
| TYPE OF MATERIAL HANDLED: (check one or r | |
| | ndustrial Waste 🔀 Liquid Waste 🔀 Rubbish 🗌 Other |
| FFF: The required annual license fee of \$25.00 | ☑ is not attached (specify) |

I hereby certify that the foregoing information is accurate and complete

BOND: The power of attorney and bond in the amount of_

(governments and agencies thereof exempt.)

(bond of \$500.00/acre, minimum bond \$2500.00)

(signature and title of applicant)

Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased use statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended

Acknowledgment of receipt of annual \$25.00 license fee received by me on

Signature A

For Complian.: 1 12 SEP 26 1967

EXABBIBB AN

MICHIGAN DEPARTMENT SOFCELERATE HEALTH

きないののVED

1 1 67, P.A. 1965

MICHIGAN DEPARTMENT OF PUBLIC HEALTH DIVISION OF ENGINEERING

| NAME OF PROPERTY OWNER (Include zip code) NAME OF OPERATOR RESPONSIBLE PERSON TO CONTACT Address #2 | Michigan Department of Public Health Division of Engineering 3500 North Logon Street Lensing, Michigan 48914 Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste displaced the provisions of Act 87, P.A. 1965. Date 1.5 | DIVISION | N OF ENGINEERING |
|---|--|--|---|
| Michigan Department of Public Health Division of Engineering 3300 North Logna Street Lansing, Michigan 48914 APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of last copy for instructions) [Fill on in triplicary] Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposate and error through the provisions of Act 87, P.A. 1965. Date | Michigan Department of Public Health Division of Engineering 3500 North Logns Street Lensing, Michigan 48914 APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See beek of fast copy for Instructions) [Fill out to triplication Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposate of the provisions of Act 87, P.A. 1965. NAME OF DISPOSAL AREA Cocation Common | 💉 | . ▼ |
| Michigan Department of Public Health Division of Engineering 3300 North Logan Street Lensing, Michigan 48914 APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of least copy for instructions) [Fill on thirplicary] APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of least copy for instructions) [Fill on thirplicary] APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of least copy for instructions) [Fill on thirplicary] APPLICATION in thiplicary APPLICATION of the Disposal AREA LICENSE (See back of least copy for instructions) [Fill on thirplicary] APPLICATION of the Disposal AREA LICENSE (See back of least copy for instructions) [Fill on thirplicary] APPLICATION of the Disposal AREA LICENSE (See back of least copy for instructions) [Fill on thirplicary] APPLICATION of the Disposal AREA LICENSE (See back of least copy for instructions) [Fill on thirplicary] | Bonding Co. Act na Casualty and Surety Company Mr. E. Fosner Agent M. E. Fosner Agent Address Leasing, Michigan 48914 Application of Engineering 3300 North Logan Street Leasing, Michigan 48914 APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See beek of fest copy for Instructions) [Fill out to triplicate) addition Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposere under the provisions of Act 87, P.A. 1965. NAME OF DISPOSAL AREA Address Address Address Address Address Address Institute of the provision of Act 87, P.A. 1965. NAME OF PROPERTY OWNER Address Address Address Address Address Institute of the provision of Act 87, P.A. 1965. NAME OF PROPERTY OWNER Address Address Address Address Address Institute of the provision of Act 87, P.A. 1965. NAME OF PROPERTY OWNER Address Address Address Address Address Institute of the provision of Act 87, P.A. 1965. NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Address Includes sign code) NAME OF PROPERTY OWNER Address Address Includes sign code) N | 1 | DO NOT WRITE IN THIS SPACE |
| MAME OF DISPOSAL AREA LOCATION NAME OF PROPERTY OWNER MAME OF OPERATOR MAME OF PROPERTY OWNER MAME OF OPERATOR MAME OF PROPERTY OWNER MAME OF OPERATOR MAM | Michigan Department of Public Health Division of Engineering 3500 North Logan Street Leaning, Michigan 48914 Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disperse under the provisions of Act 87, P.A. 1965. Date | TO: | · |
| Division of Engineering 3500 North Logan Street Lensing, Michigan 48914 APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE [See book of lest copy for instructions] [Fill out in triplicate) Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposa area under the provisions of Act 87, P.A. 1965. Date 9 - 15 - 68 NAME OF DISPOSAL AREA Advance of Public Health, for a license to operate a solid waste disposa area under the provisions of Act 87, P.A. 1965. Date 9 - 15 - 68 NAME OF DISPOSAL AREA Advance of Public Health, for a license to operate a solid waste disposa area under the provisions of Act 87, P.A. 1965. NAME OF PROPERTY OWNER Advance of Public Health, for a license to operate a solid waste disposa area under the provisions of Act 87, P.A. 1965. NAME OF PROPERTY OWNER Advance of Public Health of Public He | Division of Engineering 3500 North Logen Street Lansing, Michigan 48914 APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of last copy for Instructional) General General General General | Michigan Department of Public Health | |
| APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of last copy for instructions) General G | APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for instructional delivery continued on the provisions of Act 87, P.A. 1965. Date See back of lest copy for although the provisions of a new or increased statement to the left of see of September delivery continued on the left of september delivery continued on the provisions of a new or increased statement to the left of september delivery continued on the left of september delivery continued on the left of september delivery continued on the left of september delivery continued to the left of september delivery continued | • | |
| APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of last copy for Instructions) | APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE See back of four capy for Instructional General G | | /100 |
| APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of last copy for Instructional) [Fill out in triplicate] addition Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposa area under the provisions of Act 87, P.A. 1965. Date 15 - 68 | APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See bock of last cape for instructions) [Fill out in triplicate) oddition area under the provisions of Act 87, P.A. 1965. Date J - /5 - 68 NAME OF DISPOSAL AREA Address Other than Special Control of the Control of | | |
| APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of last copy for instructions) new (Fill out in triplicate) addition Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposa area under the provisions of Act 87, P.A. 1965. Date 1.5-68 | APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See bock of lost copy for instructional) [Fill out in triplicate] dedition Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste displacement and earth provisions of Act 87, P.A. 1965. Date - /5 - 68 | actioning, interingent control | Bond Value \$2,300.00 |
| (See back of last copy for instructions) (Fill out in triplicate) (F | Case back of last copy for instructions City out in riplicates addition addition | | Loc. Code |
| Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposa area under the provisions of Act 87, P.A. 1965. Date | Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste displaced under the provisions of Act 87, P.A. 1965. Date \$\frac{1.5-68}{\text{NAME OF DISPOSAL AREA}}\$ Address or additional location description | (See back of | last copy for instructions) |
| Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposare area under the provisions of Act 87, P.A. 1965. Date | Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste dispute area under the provisions of Act 87, P.A. 1965. Date | | |
| NAME OF DISPOSAL AREA Country C | NAME OF DISPOSAL AREA LOCATION Country) Colty, village or township (country) Conditional location description (conditional location description) Conditional location description (conditional location description) Address (conditional location description) Address (conditional location description) (conditional location description) Address (conditional location description) (conditional location description description) (conditional location description descript | | · |
| NAME OF DISPOSAL AREA LOCATION Country Country Country Country LOCATION Country C | NAME OF DISPOSAL AREA LOCATION Country General Responsible PERSON TO CONTACT Address Had Feeding Sanitary Landfill Incineration Ceneral Refuse General Refuse Genera | | artment of Public Health, for a license to operate a solid waste disposal |
| NAME OF DISPOSAL AREA County) County Coun | NAME OF DISPOSAL AREA County Aggs City, village or township (section) | area under the provisions of Act 87, P.A. 1965. | |
| NAME OF DISPOSAL AREA County) County Coun | NAME OF DISPOSAL AREA County Aggs City, village or township (section) | 0-15-10 | · |
| County C | County C | Date | |
| County C | County C | \sim | |
| County C | County C | NAME OF DISPOSAL AREA | creden Townskip Size 10 acces |
| NAME OF PROPERTY OWNER | NAME OF PROPERTY OWNER State Address H2 Y Fastic State H3 Y Fastic Make | 0.00 | |
| NAME OF PROPERTY OWNER | NAME OF PROPERTY OWNER State Address H2 Y Fastic State H3 Y Fastic Make | LOCATION CALKOUM | Shuden Journship |
| NAME OF PROPERTY OWNER Conditional location description) NAME OF OPERATOR Conditions of the state of the sta | NAME OF PROPERTY OWNER Conditional location description | (county) | (city, village or township) (section) |
| RESPONSIBLE PERSON TO CONTACT Address Continue Co | RESPONSIBLE PERSON TO CONTACT Address Conclude zip code Code Code Code Code Code | 99951 | Quession Duce |
| RESPONSIBLE PERSON TO CONTACT Address Continue Co | RESPONSIBLE PERSON TO CONTACT Address Address | (address or additional location desc | ription) |
| RESPONSIBLE PERSON TO CONTACT Address Continue Co | RESPONSIBLE PERSON TO CONTACT Address Conclude zip code Code Code Code Code Code | | |
| RESPONSIBLE PERSON TO CONTACT Address Continue Co | RESPONSIBLE PERSON TO CONTACT Address Conclude zip code Code Code Code Code Code | 1 1 0 1/2 | |
| RESPONSIBLE PERSON TO CONTACT Address Continue Co | RESPONSIBLE PERSON TO CONTACT Address Conclude zip code Code Code Code Code Code | NAME OF PROPERTY OWNER South | ech Address H24 Patte Pue Compan Minh |
| RESPONSIBLE PERSON TO CONTACT Address #24 | RESPONSIBLE PERSON TO CONTACT Address #24 | (individual, firm, township, city | (include zip, code) 4/92/19 |
| RESPONSIBLE PERSON TO CONTACT Address #24 | RESPONSIBLE PERSON TO CONTACT Address #24 | NAME OF OPERATOR IN 11/00/1/14 | Address Address |
| Address ## ## ## ## ## ## ## ## ## ## ## ## # | Address #2 | NAME OF OFERATOR | |
| Address ## ## ## ## ## ## ## ## ## ## ## ## # | Address #2 | DECRONCIBLE DEPCON TO CONTACT | 1) Stuck |
| TYPE OF DISPOSAL OPERATION: (If more than one area involved file separate application for each) Sanitary Landfill | TYPE OF DISPOSAL OPERATION: (If more than one area involved file separate application for each) Sanitary Landfill | RESPONSIBLE PERSON TO CONTACT DE PERSON (1 | f other than operator) |
| TYPE OF DISPOSAL OPERATION: (If more than one area involved file separate application for each) Sanitary Landfill | TYPE OF DISPOSAL OPERATION: (If more than one area involved file separate application for each) Sanitary Landfill | W NOW Pathalles land | 100 Whit 49202 |
| Sanitary Landfill | Sanitary Landfill | Address 704 July Company | |
| Sanitary Landfill | Sanitary Landfill | TVDE OF DISPOSAL OPERATION OF | |
| Incineration | Incineration TYPE OF MATERIAL HAND LED: (check one or more) General Refuse Carbage Industrial Waste Liquid Waste Rubbish Other FEE: The required annual license fee of \$25.00 is is not attached. (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete Any disposal degration passibly fivolving the use of the waters of the State also requires the submission of a new or increased statement to the water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment in eccipt of atmus \$25.00 license fee for Compliance with Act 87, P.A. 1920 For Compliance with Act 87, P.A. 1920 | | |
| TYPE OF MATERIAL HAND LED: (check one or more) General Refuse Garbage Industrial Waste Liquid Waste Rubbish FEE: The required annual license fee of \$25.00 is is not attached. (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of is attached. (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (algnature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the later besolves Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of algorithms are provided by act 245, P.A. 1929 as amended Acknowledgment of receipt of algorithms are provided by me on the complete of the state also requires the submission of a new or increased us statement to the later besolves Commission as provided by Act 245, P.A. 1929 as amended | TYPE OF MATERIAL HAND LED: check one or more) General Refuse | Sanitary Landfill | |
| General Refuse Garbage Industrial Waste Liquid Waste Rubbish Other (apecify is not attached. (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of is attached. (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (aignature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment in receipt of aignus \$25.00 license fee (aignature and title of applicant) (aignature and title of applic | General Refuse Garbage Industrial Waste Liquid Waste Rubbish Other is not attached. (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of is attached. (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (algument and ittle of applicant) Any disposal operation passibly involving the use of the waters of the State also requires the submission of a new or increased statement to the later Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment infreceipt of atmus \$25.00 livense fee For Compliance with Act 87, P.A. 1930 For Compliance with Act 87, P.A. 1930 | | Uther(specify |
| FEE: The required annual license fee of \$25.00 is is not attached. (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of is attached. (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (eignature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of aknual \$25.00 license fee | FEE: The required annual license fee of \$25.00 is is not attached. (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of | TYPE OF MATERIAL HAND LED: (check one or more) | |
| (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of | (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of | ☐ General Refuse 🛣 Garbage 🛣 Industria | al Waste 🔲 Liquid Waste 🔀 Rubbish 🔲 Other |
| (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of | (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of is attached. (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (signature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the water Resolving Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment infreceipt of annual \$25.00 license fee 1960 For Compliance with Act 87, P.A. 1933 OCT 14 1968 | FEE: The required annual license fee of \$25.00 | is is not attached. |
| BOND: The power of attorney and bond in the amount of is attached. (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (signature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment diffreceipt of aknual \$25.00 license fee (Signature and title of applicant) Leave This Space Riank (Signature and title of applicant) Acknowledgment diffreceipt of aknual \$25.00 license fee | BOND: The power of attorney and bond in the amount of is attached. (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (signature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the water besources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of akinutal \$25.00 license fee 1960 19 | - | . |
| (signature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment in receipt of abrulal \$25.00 license fee the state also requires the submission of a new or increased us statement to the water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment in receipt of abrulal \$25.00 license fee the state also requires the submission of a new or increased us statement to the water Resources Commission as provided by Act 245, P.A. 1929 as amended | (bond of \$500.00/acre, minimum bond \$2500.00) I hereby certify that the foregoing information is accurate and complete (algorithm and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment in receipt of almust \$25.00 license fee (b) (algorithm and title of applicant) (c) (algorithm and title of applicant) (d) (algorithm and title of applicant) (d) (algorithm and title of applicant) (e) (algorithm and title of applicant) (algorithm and title of applicant) (d) (algorithm and title of applicant) (e) (algorithm and | | • • |
| I hereby certify that the foregoing information is accurate and complete (algnature and title of applicant) Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the water Respurices Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment off receipt of almusal \$25.00 license fee the licen | Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment diffreceipt of akinual \$25.00 license fee 19 | ` <u> </u> | |
| Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of almus \$25.00 license fee | Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of akmus \$25.00 license fee The Compliance with Act 87, P.A. 1900 OCT 14 1968 | (bond of \$500.00) dete, minimum bon | μα ψ2.500.00) |
| Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of almus \$25.00 license fee | Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of akmus \$25.00 license fee The Compliance with Act 87, P.A. 1900 OCT 14 1968 | I havely and the that the forestime information is incorrected | and complete |
| Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of almust \$25.00 license fee Leave This Space Rlank Increased us a submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended | Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of akunda \$25.00 license fee | I nereby certify that the foregoing information is accurate a | and complete |
| Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of almust \$25.00 license fee Leave This Space Rlank Increased us a submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended | Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of akunda \$25.00 license fee | H | |
| Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of almust \$25.00 license fee Leave This Space Rlank Increased us a submission of a new or increased us statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended | Any disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased statement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Acknowledgment of receipt of akunda \$25.00 license fee | (signature ar | nd title of applicant) |
| Acknowledgment of receipt of almus \$25.00 license fee Leave This Space Rlank Acknowledgment of receipt of almus \$25.00 license fee Leave This Space Rlank The ceived by me on the ceived by the ceiv | Acknowledgment of receipt of almuss \$25.00 license fee Leave This Space Rtank Discovered by me on 1960 For Compliance with Act 87, P.A. 1990 OCT 14 1968 | The second secon | |
| Acknowledgment of receipt of akmusik \$25.00 license fee MO Leave This Space Rlank indicated by me on the control of the contro | Acknowledgment of receipt of akmusi \$25.00 license fee | | |
| Deceived by me on ASA PROVED AND APPROVED | 19 EXAMINED AND APPROVED For Compliance with Act 87, P.A. 1900 | statement to the Water Resources Commission as provided | by Act 245, P.A. 1929 as amended |
| inceived by me on ASA PARTITION AND APPROVED | 1960 For Compliance with Act 87, P.A. 1883 | | |
| EXAMINED AND APPROVED | For Compliance with Act 87, P.A. 1903 | Acknowledgment his leceipt of aknual \$25.00 license fee | . M = 1 |
| | For Compliance with Act 87, P.A. 1900 | // libeceived by me on | The training Charles |
| | For Compliance with Act 87, P.A. 1900 | | EXAMENSO AND APPROVED |
| 1 1 of Office Aut Office 2000 | 100 - 11/1968 | 1960 |) |
| | Signature () () () () () () () () () (| | |
| Signature / 1 / 1 / 1968 | 1 7 1 | Signature / Will /) all | 1 \(\rho \) \(\lambda \) \(|
| | | | 1 pll |

MICHIGAN DEPARTMENT OF PUBLIC HEALTH DIVISION OF ENGINEERING

DIVISION OF ENGINEERING DO NOT WRITE IN THIS SPACE TO: Bonding Co._ Michigan Department of Public Health Agent_ Division of Engineering Address _ 3500 North Logan Street License No. Lansing, Michigan 48914 Bond Value _ Loc. Code -APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE (See back of last copy for instructions) (Fill out in triplicate) _ renewal addition Application is hereby made to the Director, Michigan Department of Public Health, for a license to operate a solid waste disposal area under the provisions of Act 87, P.A. 1965. 30 NAME OF DISPOSAL AREA LOCATION (section) (city, village or township) NAME OF PROPERTY OWNER Address 🗻 NAME OF OPERATOR **RESPONSIBLE PERSON TO CONTACT** (include zip code) TYPE OF DISPOSAL OPERATION: (If more than one area involved file separate application for each) Sanitary Landfill ☐ Hog Feeding ☐ Incineration Other_ (specify) TYPE OF MATERIAL HANDLED: (check one or more) General Refuse □ Garbage Industrial Waste ☑ Liquid Waste Rubbish Other. FEE: The required annual license fee of \$25.00 is is not attached. (governments and agencies thereof exempt.) BOND: The power of attorney and bond in the amount of_ _ is attached. (bond of \$500.00/acre, minimum bond \$2500.00) hereby certify that the foregoing information is accurate and complete (signature and title of applicant) ny disposal operation possibly involving the use of the waters of the State also requires the submission of a new or increased use tatement to the Water Resources Commission as provided by Act 245, P.A. 1929 as amended Honor of Public HEALTH Leave This Space Blank ON .cknowledgment of receipt of annual \$25.00 license fee received by me on A FROVED ∞ av. P.A. 1965

OCT 6 1969

55.2 - 2M - 1/66

ignature

MICHIGAN DEPARTMENT OF PUBLIC HEALTH DIVISION OF ENGINEERING

| <u> </u> | |
|---|--|
| TO: | DO NOT WRITE IN THIS SPACE |
| • | Bonding Co. The Aetna Casualty and Surety Company |
| Michigan Department of Public Health | Agent H. D. Schaefer, Jr. |
| Division of Engineering 3500 North Logan Street | Address |
| Lansing, Michigan 48914 | License No. 70-081 Bond Value \$2,500.00 (Bond No. 24 S 12776 BC) |
| Consing, Michigan 40714 | Bond Value 32,500.00 (Bond No. 24 5 12/76 BC) |
| | Loc. Code |
| | J . ——————————————————————————————————— |
| APPLICATION FOR | SOLID WASTE DISPOSAL AREA LICENSE |
| | ack of last copy for instructions) |
| (566) | (Fill out in triplicate) |
| ☐ new | renewal addition |
| Application is hereby made to the Director, Michigan | Department of Public Health, for a license to operate a solid waste disposal |
| area under the provisions of Act 87, P.A. 1965. | |
| | |
| Date 8 25 - 10 | |
| | |
| NAME OF DISPOSAL AREA | Shillan lup Size / Ollins |
| \sim | (acres) |
| LOCATION County) | (city, village or township) (section) |
| 2001 | (cection) |
| (address or additional location | on description) |
| 4 | |
| | 11 . It 11010 101 |
| NAME OF PROPERTY OWNER OF A | String of the land Comers City. |
| NAME OF PROPERTY OWNER (individual, first, township) | ip, city, etc.) (include zip code) 442/33, |
| NAME OF OPERATOR L. M. Wash | Address Address |
| NAME OF OPERATOR & LAPIT WASHE | Address (include zip code) |
| RESPONSIBLE PERSON TO CONTACT | do- Officielo. |
| RESTORSIBLE LENSON TO CONTACT. | (If other than operator) |
| Address Cull Lake | must City Wich 49233 |
| 11441055 | (include zip code) |
| TYPE OF DISPOSAL OPERATION: (If more than or | ne area involved file separate application for each) |
| ☑ Sanitary Landfill | Hog Feeding |
| Incineration | Other(specify |
| TYPE OF MATERIAL HAND LED: (check one or mo | |
| | dustrial Waste 🛛 Liquid Waste 🖾 Rubbish 🔲 Other |
| FEE: The required annual license fee of \$25.00 | |
| (governments and agencies the | |
| BOND: The power of attorney and bond in the amo | |
| (bond of \$500.00/acre, minimum | |
| | |
| I hereby certify that the foregoing information is accu | rate and complete |
| L 1 | n p A. |
| Norder_D | I & Verent |
| (signa | iture and title of applicant) |
| · · · · · · · · · · · · · · · · · · · | f the waters of the State also requires the submission of a new or increased use |
| statement to the Water Resources Commission as prov | rided by Act 245, P.A. 1929 as amended |
| | c. v mi c ni |
| Acknowledgment of receipt of annual \$25.00 license | |
| reserved by me on | MICHIGAN DEPARTMENT OF PUBLIC HEALTH |
| 0/27 | ENGINEERING DIVISION |
| | EXAMINED AND APPROVED |
| 650 A A A A A A A A A A A A A A A A A A A | V For Compliance with Act 87, P.A. 1965 |
| Signature | SEP 21 1970 |
| · / / / / / / / / / / / / / / / / / / / | 1/1/2 \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ |

Title ___

D65.2 - 2M - 1/66

MICHIGAN DEPARTMENT OF PUBLIC HEALTH DIVISION OF ENGINEERING

| | • |
|--|--|
| | DO NOT WRITE IN THIS SPACE |
| TO: | Bonding Co. Aetna Casualty and Surety Company |
| Michigan Department of Public Health | Agent H. D. Schaefer, Jr. |
| Division of Engineering | Address |
| 3500 North Logan Street | 1/23 |
| Lansing, Michigan 48914 | 62 500 00 (Pand No. 24 C 255 POL) |
| | Bond Value 32, 300.00 (Bolld No. 24 5 233 BCA) |
| | Loc. Code |
| | OR SOLID WASTE DISPOSAL AREA LICENSE |
| (366 | back of last copy for instructions) |
| . 🗀 | (Fill but in triplicate) |
| . ∟ new | Marenewal Laddition |
| Application is hereby made to the Director, Michigan | in Department of Public Health, for a license to operate a solid waste disposa |
| area under the provisions of Act 87, P.A. 1965. | |
| 1 15 7/ | |
| Date 8 13 - // | |
| | |
| NAME OF DISPOSAL AREA Shered | 201 ///icon sin //un \$5 |
| NAME OF DISPUSAL AREA | Size Marces) |
| | |
| LOCATION Calhour | (city, village or township) (section) |
| (county) | (city, village or township) (section) |
| I The Cast of | allion on Ene Ra |
| | tion description) |
| | |
| | 11 / Camer |
| THE PROPERTY OF THE PARTY OF TH | POULD IT A TOUR |
| NAME OF PROPERTY OWNER (individual, firm, towns | this direction Address for The Company (Include zip code) |
| | |
| NAME OF OPERATOR Conduction | Address Addres |
| | (include zip code) |
| RESPONSIBLE PERSON TO CONTACT | |
| | (if other than operator) |
| Address | • |
| Address | . (Include zip code) |
| | |
| | one area involved file separate application for each) |
| Sanitary Landfill | ☐ Hog Feeding |
| Incineration | Other(specif |
| TYPE OF MATERIAL HAND LED: (check one or m | |
| | . • • · · · · · · · · · · · · · · · · · |
| | ndustrial Waste |
| FEE: The required annual license fee of \$25.00 | is is not attached. |
| (governments and agencies th | iereof exempt) 00 |
| BOND: The power of attorney and bond in the amo | ount ofis attached. |
| (bond of \$500.00/acre, minim | |
| (bond of \$500.00) acre, minim | um bond \$2500.00) |
| | |
| I hereby certify that the foregoing information is acc | curate and complete |
| | |
| A worker | 1 seuces |
| (algr | nature and title of applicant) |
| Any disposal operation possibly involving the use | of the waters of the State also requires the submission of a new or increased us |
| statement to the Water Resources Commission as pro | |
| The state of the s | |
| | |
| Acknowledgment of receipt of annual \$25.00 license | MICHICAN DEPARTMENT PROPERTY OF THE SPACE Blank |
| received by me on | MICHIGAN DEPARTMENT OF PUBLIC HEALTH |
| | ENGINEERING DIVISION |
| 1 lug 25 2 1 | / / / / / / / / / / / / / / / / / / / |
| | EXAMINED AND APPROVED |
| 11 1 1 mm / | IZ Z ZZ ZVIHVHOUCE With A.A.On |

Signature _

D65.2 - 2M - 1/66

DEC 3 1971

MICHIGAN DEPARTMENT OF PUBLIC HEAD THE Bureau of Environmental Health

| | → |
|---|---|
| Submit Through Your Local Health Department To: | Do not write in this space |
| Michigan Department of Public Health | Bonding Co. Aetna Casualty and Surety Company |
| Division of Solid Waste Management | Agent Vera L. Indwig |
| 3500 North Logan Street | Address Jackson, Michigan License No. 1728 |
| Lansing, Michigan 48914 | Bond Value \$2,500.00 (24512776BC) |
| | Loc. Code |
| | |
| APPLICATION FOR SOLID | WASTE DISPOSAL AREA LICENSE |
| L new | renewal |
| | artment of Public Health, for a license to operate a solid waste disposa |
| area under the provisions of Act 87, P.A. 1965, as amended. | |
| NAME OF DISPOSAL AREA | n allewon DATE aug 15-72 |
| TAMES OF SOME AREA | |
| TYPE OF DISPOSAL OPERATION: (If more than one area invo | ived file separate application for each) |
| Sanitary Landfill (acres) | Refuse Transfer Facility |
| Incineration (compacity) | ☐ Processing Plant |
| Other(apecify) | Construction Cost(except landfills) |
| LOCATION Calkow | Sheer class |
| (county) (address) | (lownship or municipality) (section) |
| and Tuo Mile la | st of allien Duession It. |
| 09/0 | (directions to site) |
| Number of acres available for landfilling, excludi | ing dicensed portion |
| | |
| NAME OF APPLICANT (individual firm, township, city, etg. | (IIII) |
| Address Lot # 1 Carelal La | he Cement Coly Mickode 49233 |
| Address of the Carpetin Jan | Cal I A |
| RESPONSIBLE PERSON TO CONTACT | Washerm |
| (If other t | han applicant) |
| Address | Zip Code |
| NAME OF PROPERTY OWNER Standar Stee | Address Same as Rhove |
| NAME OF PROPERTY OWNER A POWER A | Address Device Rose |
| TYPE OF MATERIAL HANDLED: (check one or more) | General Refuse 🔀 Garbage |
| FEE: The required angual license for Coop on | (epectfy) |
| FEE: The required annual license fee of \$25.00 is a | ttached. (governmental units exempt) |
| CHECKS MUST BE MADE PAYABLE TO THE LOC | CAL HEALTH DEPARTMENT. |
| BOND: Sanitary Landfill bond of \$500/acre (minimum \$2 | ,500) and poweMatterany preparation of PUBLIC HEALTH |
| Facility Bond of 1/4 of 1% of construction cos | CONTINUE TO SEPARTMENT OF PUBLIC HEALTH |
| Governmental unit performance bond is attache | t (minimum \$2,500) and BURKALD OF CHICALTH d. |
| | |
| I hereby certify that the foregoing information is accurate and | d complete. 2 OCT 9 1972 |
| li and | EXAMINED AND APPROVED |
| Suran Dellevel D. | For Compliance with Act 87, P.A. 1965 |
| (signature and title of applicant) | |
| Any disposal operation possibly involving the use of the war | ters of the State or the flood plain of any water course must be reviewed |
| by the Water Resources Commission under specific legislativ | re authority. |
| | March de |
| | |
| cknowledgment of receipt of annual \$25.00 license fee recei | ived by me on the 29 1972 |
| | |
| ignature and aper | $K \sim 1$ |
| 55.2 - 2M - 1/72 | |
| | |

Environmental Protection Branch Solid Waste Management Division

| Submit Through Your Local Health Department To: | Do not write in this space |
|--|--|
| Michigan Department of Natural Resources | Bonding Co. AETNA |
| Environmental Protection Branch | Agent H. David Hoovler |
| Solid Waste Management Division | Address |
| Stevens T. Mason Building | License No. 2215 |
| Lansing, Michigan 48926 | Bond Value |
| | Loc. Code |
| APPLICATION FOR SOLID WAS | STE DISPOSAL AREA LICENSE |
| new . | renewal |
| | ent of Natural Resources, for a license to operate a solid waste |
| lisposal area under the provisions of Act 87, P.A. 1965, as amend | ded. |
| | 11. 19.73 |
| NAME OF DISPOSAL AREA Specular US | Chron DATE aug 9: 73 |
| TYPE OF DISPOSAL OPERATION: (If more than one area involved f | |
| Sanitary Landfill (acres) | Refuse Transfer Facility |
| Incineration (capacity) | Processing Plant |
| | _ |
| LJ Other(specify) | Construction Cost(except landfills) |
| LOCATION Calhorn | Shiridan |
| | (towgship or municipality) (section) |
| Tues Wels East of We | lon on Venusion St. |
| | (directions to site) From 15 to 40 |
| Number of acres available for landfilling excluding li | |
| | Now on more avalues. |
| NAME OF APPLICANT Norton & | with LICE MAPLET, |
| (individual, firm, township, city, etc.) | P 11/2 4/122 |
| Address For # Puptul Jakel | Coment City Zip Code 49233 |
| | |
| RESPONSIBLE PERSON TO CONTACT | upplicant) |
| | |
| Address | Zip Code |
| NAME OF PROPERTY OWNER OF MANY | ence Address & and as about |
| NAME OF TROPERTY OFFICE | Address |
| TYPE OF MATERIAL HANDLED: (check one or more) | General Refuse 🔀 Garbage |
| ☐ Liquid Waste | Rubbish Other (specify) |
| — — — — — — — — — — — — — — — — — — — | it about (openly) |
| FEE: The required annual license fee of \$25.00 🔀 is attach | hed. (governmental units exempt) |
| CHECKS MUST BE MADE PAYABLE TO THE LOCAL | |
| | |
| BOND: Sanitary Landfill bond of \$500/acre (minimum \$2,500) | and power of attorney are attached URAL RESOURCES |
| Facility Bond of 1/4 of 1% of construction cost (mi | nimum 12,500) and power of attorney are attached |
| Governmental unit performance bond is attached. | |
| | SEP 1 5 1973 |
| I hereby certify that the foregoing information is accurate and co | EYAN D AND APPROVED For Complete with Act 87, P.A. 1935 |
| | EYAN AND APPROVED |
| | For Comp 123 With Apt 87, P.A. 1955 |
| Water James and Hills of applicant) | one. |
| (eignature and title of applicant) | of the State on the flood aloin of any motor course must be reviewed |
| | s of the State or the flood plain of any water course must be reviewed |
| by the Water Resources Commission under specific legislative at | uniority. |
| | |
| | d by me on 8-15 19.23. |
| Acknowledgment of receipt of annual \$25.00 license fee received | 1 by me on19 |
| α /.1. A | |
| Signature Little L. | , S , which is a second of the |
| JIE 11116 | |



Environmental Protection Branch Solid Waste Management Division

| Submit Through Vous Local Health Donastment To: | Do not maito in this areas |
|--|--|
| Submit Through Your Local Health Department To: | Do not write in this space Bonding Co. AETNA CASUALTY |
| Michigan Department of Natural Resources | Vora I India |
| Environmental Protection Branch | |
| Solid Waste Management Division | License No. 333/ |
| Stevens T. Mason Building | 3 500 00 (|
| Lansing, Michigan 48926 | |
| | Loc. Code |
| new new | WASTE DISPOSAL AREA LICENSE |
| Application is hereby made to the Director, Michigan Depa Hisposal area under the provisions of Act 87, P.A. 1965, as a | |
| NAME OF DISPOSAL AREA Sheedan | Albion DATE 9-10 74 |
| TYPE OF DISPOSAL OPERATION | · . |
| TYPE OF DISPOSAL OPERATION: (If more than one area invol | —————————————————————————————————————— |
| Sanitary Landfill (acres) | Refuse Transfer Facility |
| Incineration (capacity) | LJ Processing Plant |
| Other(specify) | Construction Cost(except landfills) |
| P 11 | |
| LOCATION Calkorn | Shindan |
| (county) (address) | (township or municipality) (section) |
| | (directions to site) |
| | |
| Number of acres available for landfilling, excluding | ng licensed portion 20 100 |
| & // // | |
| NAME OF APPLICANT (individual, firm, township, city, etc.) | y sever |
| Address Lat # 1 Explat Lake C | ement City Much Zip Code 49233 |
| | |
| RESPONSIBLE PERSON TO CONTACT | nen applicant) |
| | |
| Address | Zip Code |
| The state of the s | Tuesde Address Lat I lugs fal fake |
| NAME OF PROPERTY OWNER WAS A | Address Address |
| C=====1 | |
| TYPE OF MATERIAL HANDLED: (check one or more) | General Refuse Garbage Rubbish Other (specify) |
| 🗹 Industrial Waste 🔲 Liquid Waste | Rubbish Uther (specify) |
| | |
| FEE: The required annual license fee of \$25.00 is at | |
| CHECKS MUST BE MADE PAYABLE TO THE LOC | AL HEALTH DEPARTMENT. |
| | |
| BOND: Sanitary Landfill bond of \$500/acre (minimum \$2) | |
| | t (minimum \$2,500) and power of attorney are attached. |
| Governmental unit performance bond is attache | d |
| | DEPARTMENT OF NATURAL RESOURCES |
| I hereby certify that the foregoing information is accurate an | d complete, SOLID WASTE MANA SELECT DIVISION |
| | |
| | OCT 29 1974 |
| - Som N Slews | |
| (signature and title of applicant) | EXAMINAD AND APPROVED atters of the State Apple flood plain of any water course must be reviewed |
| Any disposal operation possibly involving the use of the wa | iters of the State of the flood plain of any water course must be reviewed |
| by the Water Resources Commission under specific legislative | ve adthority. |
| | |
| • | intac L |
| Acknowledgment of receipt of annual \$25.00 license fee receipt | eived by me on 12 DEPT 1974. |
| | |
| 121-121 V - 1 | |
| Signature Thil B Kukural & Title | heele of Eff. |
| | R 5501 4/73 |
| • | • |

Environmental Protection Branch

| . Solid Waste Mana | agement Division |
|--|---|
| Submit Through Your Local Health Department To: | Do not write in this space |
| Michigan Department of Natural Resources | Bonding Co. <u>Aetna Life & Casualty</u> |
| Environmental Protection Branch | Agent |
| Solid Waste Management Division | Address |
| Stevens T. Mason Building | License No. 3746 |
| Lansing, Michigan 48926 | Bond Value\$2,500 |
| | Loc. Code |
| APPLICATION FOR SOLID WAS | STE DISPOSAL AREA LICENSE |
| new . | renewal |
| Application is hereby made to the Director, Michigan Departme | nt of Natural Resources, for a license to operate a solid waste |
| disposal area under the provisions of Act 87, P.A. 1965, as amend | |
| | Phison DATE 9. 22-75 |
| NAME OF DISPOSAL AREA Spendan | Muson DATE / 22/5 |
| | |
| TYPE OF DISPOSAL OPERATION: (If more than one area involved f | |
| Sanitary Landfill (| Refuse Transfer Facility |
| ☐ Incineration (capacity) | ☐ Processing Plant |
| U Other(specify) | Construction Cost(except landfills) |
| LOCATION A PLANT | hinda- |
| LOCATION (county) (address) | (township or municipality) (section) |
| 2 Wile East of al | licion on Discussion Rd. |
| The first of the | (directions to site) |
| Number of acres available for landfilling excluding li | censed portion / 00 . at fuser time |
| in a second available to the second and the second and the second are second as the second are second are second as the second are second are seco | 1 A |
| NAME OF APPLICANT Amon | leuich |
| (individual, firm township city, etc.) | 0 101 |
| Address for # Cuffled Lube C | esnest liky zip Code 49233 |
| 1 | |
| RESPONSIBLE PERSON TO CONTACT (if other than a | mlicat) |
| 10000 | • |
| Address | Zip Code |
| NAME OF PROPERTY OWNER | 4.11 |
| NAME OF PROFERENCE OWNER | Address |
| TYPE OF MATERIAL HANDLED: (check one or more) | General Refuse Sarbage |
| ☑ Industrial Waste ☐ Liquid Waste | Rubbish Other (specify) |
| | (upcony) |
| FEE: The required annual license fee of \$25.00 X is attach | ned. (governmental units exempt) |
| CHECKS MUST BE MADE PAYABLE TO THE LOCAL | |
| _ ·_ _ | |
| BOND: Sanitary Landfill bond of \$500/acre (minimum \$2,500) | and power of attorney are attached. |
| Facility Bond of 1/4 of 1% of construction cost (min | nimum \$2,500) and EpoAper of Ethorner Fare Artad Red RESSURCES |
| Governmental unit performance bond is attached. | SOLID WASTE MANAGEMENT DIVISION |
| | > |
| I hereby certify that the foregoing information is accurate and co | mplete. > 0CT 23 1975 |
| | |
| Landen V Sterich Down | EXAMINED AND APPROVED |
| (signature and title of applicant) | For Compliance with Act 87, P.A. 1965 |
| Any disposal operation possibly involving the use of the waters | of the State or the flood plain of any water course must be reviewe |
| by the Water Resources Commission under specific legislative at | uthority. |
| $\epsilon \sim \epsilon \sim \epsilon \sim \epsilon \sim \epsilon$ | |
| | Set 29 ox |
| Acknowledgment of receipt of annual \$25.00 license fee received | 1 by me on 29 19.75. |
| | 0 _ |
| Signature Michael F. Shuller Fills & | Santarian |
| Signature Title Title | |

R 5501 4/73

MICHIGAN DEPARTMENT OF NATURAL RESOURCES
Environmental Protection Branch
Solid Waste Management Division

| Submit Through Your Local Health Department To: | Do not write in this space |
|--|--|
| Michigan Department of Natural Resources | Bonding Co. Aetna Casualty & Surety Co. |
| Environmental Protection Branch | Agent |
| | Address |
| Solid Waste Management Division | License No. 4143 |
| Stevens T. Mason Building | Bond Value \$2,500 |
| Lansing, Michigan 48926 | Loc. Code |
| | |
| | NSTE DISPOSAL AREA LICENSE |
| new | ₩ renewal |
| pplication is hereby made to the Director, Michigan Department | ent of Natural Resources, for a license to operate a solid waste |
| isposal area under the provisions of Act 87, P.A. 1965, as amer | ided. |
| | (A = 7/ |
| NAME OF DISPOSAL AREA SMINGON WA | DATE 9- 8-76 |
| TURE OF DISPOSAL OPEN TION | |
| TYPE OF DISPOSAL OPERATION; (If more than one area involved | |
| Sanitary Landfill (5 acres) | Refuse Transfer Facility |
| Incineration (capacity) | ☐ Processing Plant |
| Other(specify) | Construction Cost(except landfills) |
| | 0 0 1 |
| LOCATION Callion. E Esix Rd' | Duridan: |
| (county) (address) | (township or municipality) (section) |
| _ app 3 Hille Cast of | Alleion in Esix Rd' |
| | (directions to site) |
| Number of acres available for landfilling, excluding I | icensed portion 20. Plus another 89 acres. |
| | at Present |
| | Who have the second sec |
| (individual, firm, township, city, etc.) | 101-10 |
| Address Lat #/ Caystal John C | ement City With Zip Code 49233 |
| | |
| RESPONSIBLE PERSON TO CONTACT | · |
| (if other than | applicant) |
| Address | Zip Code |
| 6 1 0-4 | |
| NAME OF PROPERTY OWNER Lordon Shell | b Address Same as Afaul. |
| THATE OF THOSE RET OF THE PARTY | Address Action 1 |
| TYPE OF MATERIAL HANDLED: (check one or more) | ☑ General Refuse ☐ Garbage |
| Industrial Waste | Rubbish Other (specify) |
| M industrial waste | C Rubbish Cother (specify) |
| FEE: The required annual license fee of \$25.00 X is attac | had (tal mate are-et) |
| | |
| CHECKS MUST BE MADE PAYABLE TO THE LOCAL | DEPARTMENT. |
| | DEPARTMENT OF NATURAL RESOURCES |
| BOND: Sanitary Landfill bond of \$500/acre (minimum \$2,500 | YASIC MANUSEMENT HIVISION |
| Facility Bond of 1/4 of 1% of construction cost (m | inimum \$2,\$00) and power of attorney are attached. |
| Governmental unit performance bond is attached. | OCT 15 1976 |
| | 15 15/6 |
| hereby certify that the foregoing information is accurate and co | |
| | For Compliance with Act 87, P.A. 1965 |
| | Act 87, P.A. 1965 |
| Sinder D'Sheville UW | ma. |
| (signature and title of applicant) | , |
| .ny disposal operation possibly involving the use of the water | s of the State or the flood plain of any water course must be reviewe |
| y the Water Resources Commission under specific legislative a | |
| | |
| | 1 |
| almost adament of maniet of annual 605 00 times for any time | dhuman la aka 10 Ma |
| .cknowledgment of receipt of annual \$25.00 license fee receive | u by me on |
| (), 2/1- | |
| Xx 12 /1/4 1 1/4 | losses V Ch. 1 |

R 5501 4/73

Environmental Protection Branch

| Solid Waste M | anagement Division |
|---|---|
| Submit Through Your Local Health Department To: | Do not write in this space |
| Michigan Department of Natural Resources | Bonding Co. <u>Aetna Life & Casualty</u> |
| Environmental Protection Branch | Agent |
| Solid Waste Management Division | Address |
| Stevens T. Mason Building | License No. 4497 |
| Lansing, Michigan 48926 | Bond Value\$2,500 |
| | Loc. Code |
| APPLICATION FOR SOLID | WASTE DISPOSAL AREA LICENSE |
| new new | renewal |
| | tment of Natural Resources, for a license to operate a solid waste |
| lisposal area under the provisions of Act 87, P.A. 1965, as am | _ |
| And | |
| NAME OF DISPOSAL AREA When Shere | Mar DATE 8-20:77 |
| | |
| TYPE OF DISPOSAL OPERATION: (If more than one area involve | ed file separate application for each) |
| Sanitary Landfill (acres) | Refuse Transfer Facility |
| Incineration (capacity) | Processing Plant |
| Other(specify) | Construction Cost(except landfills) |
| 0 10 0 | |
| LOCATION Calfron Ene Rd | Sheriyan |
| (County) (address) | (township or municipality) (section) |
| app 2 mile Esse | tof Whon on Ever Kd. |
| | (directions to site) One Hundrey |
| Number of acres available for landfilling, excluding | g licensed portion / OQ. Maria . Plus, |
| _ | |
| NAME OF APPLICANT CORBON STE | VICK Telephone 6887707 |
| (individual, firm, township, city, etc.) | V 1 C K Telephone <u>6 88 44 0 9</u> |
| Address Lat # Cuplot false (| EMENT CITY Zip Code 49233 |
| | |
| RESPONSIBLE PERSON TO CONTACT | Telephone |
| (11 other tha | an applicant) |
| Address | Zip Code |
| | |
| NAME OF PROPERTY OWNER Hander & She | Address Some as about. |
| · | , MSI . |
| TYPE OF MATERIAL HANDLED: (check one or more) | General Refuse 🔀 Garbage |
| 🗶 Industrial Waste 🔲 Liquid Waste | Rubbish Other (specify) |
| [[]]] | |
| FEE: The required annual license fee of \$25.00 ✓ is att | |
| CHECKS MUST BE MADE PAYABLE TO THE LOCA | L HEALTH DEPARTMENT. |
| DOUD C : T ICH I I COTOO! | DEPARTMENT OF NATURAL REGULACES |
| BOND: Sanitary Landfill bond of \$500/acre (minimum \$2,5 | 1 OULD THE IS IN HE WASHINGTON DOTTED TO |
| | (minimum \$2,500) and power of attorney are attached. |
| Governmental unit performance bond is attached | · C OCT 27 1977 |
| | |
| I hereby certify that the foregoing information is accurate and | complete. EXAMINED AND APPROVED |
| | For Compliance with Act 87, P.A. 1965 |
| Landen 1) Itarall | Dunia |
| (signature and title of applicant) | war we |
| , | ers of the State or the flood plain of any water course must be reviewe |
| by the Water Resources Commission under specific legislative | |
| by the water resources Commission under specific registative | s audionty. |
| | |
| | ved by me on \$-23. |
| Acknowledgment of receipt/of annual \$25.00 license fee recei | ved by me on $\frac{8-25}{1972}$ |
| \sqrt{k} / $$ | |
| Signature Wal Yell each F | H. DIVECPIZ |
| Signature Title C | WINCOLL TO |

MICHIC

DEPARTMENT OF NATURAL RESC

Environmental Protection Branch

Solid Waste Management Division Submit Through Your Local Health Department To: Do not write in this space Bonding Co. _ Michigan Department of Natural Resources Agent _____ Environmental Protection Branch Address . Solid Waste Management Division License No. _ Stevens T. Mason Building Bond Value _ Lansing, Michigan 48926 Loc. Code _ APPLICATION FOR SOLID WASTE DISPOSAL AREA LICENSE renewal Application is hereby made to the Director, Michigan Department of Natural Resources, for a license to operate a solid waste disposal area under the provisions of Act 87, P.A. 1965, as amended. hunder allion _____ DATE 8-22.78 NAME OF DISPOSAL AREA TYPE OF DISPOSAL OPERATION: (If more than one area involved file separate application for each) Sanitary Landfill (_______ acres) Refuse Transfer Facility ☐ Processing Plant Incineration (____ _ capacity) Construction Cost _____ U Other_ LOCATION (section) (directions to site) Number of acres available for landfilling, excluding licensed portion _ NAME OF APPLICANT __ Zip Code _<u>492 33</u> RESPONSIBLE PERSON TO CONTACT _Telephone . (if other than applicant) Address _ NAME OF PROPERTY OWNER General Refuse M Garbage TYPE OF MATERIAL HANDLED: (check one or more) Rubbish ☐ Industrial Waste Liquid Waste FEE: The required annual license fee of \$25.00 is attached. (governmental units exempt) CHECKS MUST BE MADE PAYABLE TO THE LOCAL HEALTH DEPARTMENT. . . BOND: | Sanitary Landfill bond of \$500/acre (minimum \$2,500) and power of attorney are attached. Facility Bond of 1/4 of 1% of construction cost (minimum \$2,500) and power of attorney are attached. Governmental unit performance bond is attached. For Compliance with Act 87, P.A. 1965 EXAMINED AND APPROVED I hereby certify that the foregoing information is accurate and complete. RESOURCE RECOVERY DIVISIONA Any disposal operation possibly involving the use of the waters of the State or the flood plain of any weekl-Boulst-Virils (be reviewed by the Water Resources Commission under specific legislative authority. Acknowledgment of receipt of annual \$25.00 license fee received by me on Muc 3/ 19 75. Signature

01/13/66

200000000

June 13, 1966

Mr. Gorson D. STEVICE 424 PATTIE AVE. JACKSON, NICHIGAN 49201

RE: ALBION-SHERIDAN TOMISHIP LAND FILL - CALHOUR COUNTY

Dear Sir:

Your application for a license of the above solid waste disposal facility has been approved by this department.

Enclosed is your current license. This license is issued with the following stipulations:

- 1. BURNING OF BRUSH, LOGS, TREES AND BRANCHES IN BEPARATE AREA NOT TO EXCEED ONE DAY A MONTH.
- 2. NO CYANIDE WASTES TO BE DISPOSED INTO LANDFILL.
- 3. CONTROL PAPER BLOWING.

We solicit your cooperation in operating your facility in a sanitary manner in compliance with Act 87, Public Acts of 1965.

Very truly yours,

LaRue L. Miller, Chief Section of Environmental Health Division of Engineering

BY: R. L. HADFIELD SANITARIAN

jcd Enc.

cc: Michigan Water Resources Commission

CC: CALHOUN COUNTY HEALTH DEPARTMENT

UNIVED LOND

(75, 1861)

STATE OF MICHIGAN

&&&**&&&&&&&&&&&&&&&&&&**

DEPARTMENT OF PUBLIC HEALTH LICENSE

Under the provisions of Act 87, Public Acts of 1965, a license to operate a SOLID WASTE DISPOSAL AREA

located at ALBION-SHERIDAN TOWNSHIP LAND FILL

in the county of CALHOUN

State of Michigan.

is granted to Gordon D. Stevick

#8

This license is applicable to the property described as follows:

29951 Division Drive Sheridan Township Calhoun County

containing ______ acres and will be in effect through August 31, 19 66 subject, however, to prior revocation by the Director of Public Health for any violation of the law under which it is issued or for any violations of the rules and regulations authorized thereunder or for noncompliance of any stipulations listed below.

- 1. Burning of Brush, Logs, trees and Branches in Separate area not to exceed one day a month.
- 2. NO CYANIDE WASTES TO BE DISPOSED INTO LANDFILL.
- 3. CONTROL PAPER BLOWING.

Issued at the Michigan Department of Public Health Lansing, Michigan 48914

Albert E. Heustis, M.D., M.P.H.
Director of Public Health

on 6-13-66

License No.

1023

Loc. Code

THIS LICENSE MUST BE AVAILABLE THROUGH THE OPERATOR OR OWNER DURING THE ENTIRE TIME THE DISPOSAL AREA IS IN OPERATION. THE LICENSE REMAINS THE PROPERTY OF THE DIRECTOR OF PUBLIC HEALTH.

૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱૱ઌઌઌૡ

DEC 6 711 7/66

Marebal

Mr. Gordon D. Stewick ... 424 Pattle Avenue

Jackson, Michigan 492

on-Sheridan

Dear Mr. Stevick

that

philestion and bonding forms are enclosed.

Very truly ; yours,

CHESTER A. E. LUND, M.D.

は多なが

George Rouman, Chief Environmental Health Section

MUMP



GEORGE ROMNEY, Governor

STATE OF MICHIGAN DEPARTMENT OF PUBLIC HEALTH

3500 N. LOGAN, LANSING, MICHIGAN 48914

September 27, 1967

Mr. Gordon D. Stevick 424 Pattie Avenue Jackson, Michigan 49202

Subject: Albion - Theridan Township Landfill - Calhoun County

Dear Sir:

Your application for a license of the above solid waste disposal facility has been approved by this department.

Enclosed is your current license. This license is issued with the following stipulations:

1. All salvage items to be removed from the presises daily.

We solicit your cooperation in operating your facility in a sanitary manner in compliance with Act 87, Public Acts of 1965.

Very truly yours,

LaRue L. Miller, Chief Section of Environmental Health Division of Engineering

By: R. L. Medfield, Senitarien
Revironmental Health Planning Unit

RLH/JS

Enc.

WONDERLAND

cc: Michigan Water Resources Commission Calboun County Health Department

Equal Health Opportunity for All



SERVICE ROWLEY CONTO

Presento Rice M.D.

SAFER MICHIGAL

DEPARTMENT OF BUBLIC SEATES

LIVE HADINA DHIZHAF HADOL IA DELE

Table 13, 130

it: Sorden B. Stavigh 434 Patrile houses Jackson, Klabdaya 49201

Subject: (files-theriden Torochip Leadfill + fallown faunty

Dear Sir

Your application for a license of the above solid waste disposal macility has been approved by this department.

Enclosed is your current license No. (1100) This license is desired with the following stipulations:

We solicit your cooperation in operating your facility in a sanitary manner in compliance with Act 87. Public Acts of 1965.

diese severy truly yours,

Plague L. Miller, Chief

Section of Environmental Realth
Division of Engineering

Control to the second

eri/es

Ci Michigan Water Resources Loumission

Calleren Court, Sent of Service Court



WILLIAM G. MILLIKEN, Severnor

AR. GERALD RICE, M.D. Director

DEPARTMENT OF PUBLIC HEALTH

October 9, 1969

Mr. Gorden D. Stevick 424 Pettie Avenue Jackson, Michigan 49202

Subject: Albion - Sheridan Township Landfill - Calboun County

Dear Sir:

Your application for a license of the above solid waste disposal facility has been approved by this department.

Enclosed is your current license No. 60-161. This license is issued with the following stipulations:

1. Remove salvage meterial from site more often.

We solicit your cooperation in operating your facility in a sanitary manner in compliance with Act 87, Public Acts of 1965.

+Very truly yours,

Fred B. Kallow, Chief Environmental Health Planning Unit Section of Environmental Health Division of Engineering

By: R. L. Hadfield, Sanitarian

Enc.

cc: Michigan Water Resources Commission
Calhoun County Health Department





WILLIAM G. MILLIKEN, Governor
MAURICE S. REIZEN, M.D., Director

DED ART MENT TO E DIE

DEPARTMENT OF PUBLIC HEALTH

3500 N. LOGAN, LANSING, MICHIGAN 48914

September 21, 1970

itr. Gordon D. Stevick Crystal Lake Coment City, Michigan 49233

Subject: Albien Sheridan Township - Calhoun County

Dear Sir:

Your application for a license of the above solid waste disposal facility has been approved by this department.

Enclosed is your current license No. 70-081. This license is issued with the following stipulations:

MODEL

We solicit your cooperation in operating your facility in a sanitary manner in compliance with Act 87, Public Acts of 1965.

Very truly yours,

Fred B. Kellov, Chief Section of Solid Waste Henegement Division of Engineering

By: R. L. Hadfield

Environmental Semitarian

Enc

cc: Michigan Water Resources Commission Calboun County Health Department





STATE OF MICHIGAN

፠፠፠፠፠፠፠፠፠፠፠፠፠፠%%%%%%%%%%%%%%%

DEPARTMENT OF PUBLIC HEALTH **LICENSE**

Under the provisions of Act 87, Public Acts of 1965, a license to operate a SOLID WASTE DISPOSAL AREA

located at Albion Sheridan Township

in the county of Calhoun

, State of Michigan,

is granted to Gordon D. Stevick

This license is applicable to the property described as follows: Calhoun County, Sheridan Township, 29951 Division Drive

10 _ acres and will be in effect through August 31, 19<u>71</u> subject, however, to prior revocation by the Director of Public Health for any violation of the law under which it is issued or for any violations of the rules and regulations authorized thereunder or for noncompliance of any stipulations listed below.

NONE

Issued at the Michigan Department of Public Health Lansing, Michigan 48914

September 21, 1970

License No. 70-081

Loc. Code

THIS LICENSE MUST BE AVAILABLE THROUGH THE OPERATOR OR OWNER DURING THE ENTIRE TIME THE DISPOSAL AREA IS IN OPERATION. THE LICENSE REMAINS THE PROPERTY OF THE DIRECTOR OF PUBLIC HEALTH.



WILLIAM O, MILLIKEN, Governo MAURICE S. REIZEN, M.D. Director

STATE OF MICHIGAN DEPARTMENT OF PUBLICAREALTH WESON LOGAN TANKING, MICHIGAN 48914

Mr. Gordon D. Stevick Crystal Lake Comout City, Michigan 49233

Shoridan-Albion - Calhom

Dear Sir:

Your application for a license of the above solid waste disposal area has been approved by this department.

Enclosed is your current license carrying No. has been issued for a solid waste disposal area and therefore must not receive liquid wastes without special approval from the Health Department. The stipulations on this license are as follows:

- . Cover refuse with 6" of compected earth after each day's operation.
 - kemove salvage material from site.

We solicit your cooperation in operating your facility in a sanitary manner in compliance with Act 87, Public Acts of 1965, as amended.

Wery truly yours,

Fred B. Kellow, Chief Division of Solid Wasto Henegos ween of Environmental Realth

Rodney L. Mosier Environmental Seniterian

ZIX/pc

Enc.

Michigan Water Resources Commission mty Meelth Department

Equal Health Opportunity for AIL







STATE OF MICHIGAN

DEPARTMENT OF PUBLIC HEALTH LICENSE

Under the provisions of Act 87, Public Acts of 1965, as amended, a license to

operate the

Sheridan-Albion

SOLID WASTE DISPOSAL AREA

in the county of

Calhoun

State of Michigan,

is granted to

Gordon Stevick

This license is applicable to the property located at and described as follows:

Calhoun County, heridan Township, 2 miles east of Albion on Eve Road

containing ______5 acres and will be in effect through August 31, 19 _72 subject, however, to prior revocation by the Director of Public Health for any violation of the law under which it is issued or for any violations of the rules and regulations authorized thereunder of for noncompliance of any stipulations listed below.

- Cover refuse with 6" of compacted earth after each day's operation.
- 2. Remove salvege material from site.

Issued at the Michigan Department of Public Health Lansing, Michigan 48914

December 3, 1971

License No.

1423

Maurice & Reizen, M. D.

Director

Loc. Code

THIS LICENSE MUST BE AVAILABLE THROUGH THE LICENSEE DURING THE ENTIRE TIME THE DISPOSAL AREA IS IN OPERATION. THE LICENSE REMAINS THE PROPERTY OF THE DIRECTOR OF PUBLIC HEALTH.



WILLIAM O. MILIKEN, O MAURICE S. REIZEN, M.D., Director

STATE OF MICHIGAN

EDEPARTMENT OF PUBLIC HEALTH

2500 H. LOGAN, LANSING, MICHIGAN 28914

Saturbay 5, 1972

Str. Corden D. Stevick Crystal Lake Conent City, Michigan 20233

Subject: Sheridan - Albion - Calhoun County

Dear Sir:

Your application for a license of the above solid waste disposal area whas been approved by this department.

Enclosed is your current license carrying No. 1728 has been issued for a solid waste disposal area and therefore must not receive liquid wastes without special approval from the Health Department. The stipulations on this license are as follows:

Defuse must be suread compacted and covered with at least 6" of earth at the end of each days operation.

We solicit your cooperation in operating your facility in a sanitary manner in rompliance with Act 87, Public Acts of 1965, as amended.

Wery truly yours,

Tred B. Haller, Chief Division of Solid Waste M Direct of Environmental Marith

By: Loomand D. Eulevaki Environmental Samitarian

le in

Enc.

cc: Michigan Water Resources Commission Calbour County Health Department

Equal Health Opportunity for All





***** &&&&&&&&&&&

STATE OF MICHIGAN

\$&&&&&&&

DEPARTMENT OF PUBLIC HEALTH LICENSE

Under the provisions of Act 87, Public Acts of 1965, as amended, a license to operate the Sheridan-Albian

SOLID WASTE DISPOSAL AREA

in the county of Calhoun

is granted to

Gordon Stevick

State of Michigan,

This license is applicable to the property located at and described as follows: Calhoun County, theridan Township Approximately 2 Miles East of Albian on Division Street

containing ______ acres and will be in effect through August 31, 1973_subject, however, to prior revocation by the Director of Public Health for any violation of the law under which it is issued or for any violations of the rules and regulations authorized thereunder of for noncompliance of any stipulations listed below.

Refuse must be spread compacted, and covered with at least 6" of earth at the end of each days operation.

Issued at the Michigan Department of Public Health Lansing, Michigan 48914

on October 6, 1972

License No.

1728

Maurice S. Reizen, M. D.

Director

Loc. Code

THIS LICENSE MUST BE AVAILABLE THROUGH THE LICENSEE DURING THE ENTIRE TIME THE DISPOSAL AREA IS IN OPERATION. THE LICENSE REMAINS THE PROPERTY OF THE DIRECTOR OF PUBLIC HEALTH.

MATURAL RESOURCES COMMISSION

HARRY H. WHITELEY Chairman

CARL T. YOHNSON

SHILARY F. SNELL

STATE OF MICHIGAN



WILLIAM G. MILLIKEN, Governor

DEPARTMENT OF NATURAL RESOURCES

STEVENS T, MASON BUILDING, LANSING, MICHIGAN, 48926

MATOENE GAZLAY, Director

September 13, 1973

Mr. Gordon D. Stevick Let 1 Crystal Lake Count City, NJ 49233

Subject:
Sheridan Albion - Colhoun County, Sheridan Township, 2 miles east of
Dear Sir:
Albion on Devision Street

Your application for a license of the above solid waste disposal area has been approved by this department.

Enclosed is your current license carrying No. ______. This license has been issued for a solid waste disposal area and therefore must not execute liquid wastes without special approval from the health department having jurisdiction or this office. The stipulations on this license are as follows:

1. Cover all refuse with at least 6 inches of compacted earth at the end of each day's operation.

We solicit your cooperation in operating your facility in a sanitary manner in compliance with Act 87, Public Acts of 1965, as amended.

Wery truly yours,

Fred B. Kellow, Chief
Solid Waste Management Division
Schwironmental Protection Branch

y: Leonard D. Eulawski Environmental Sanitaria

Fnc

cc: Water Resources Commission, DNR

Calhoun County Health Department

MICHIGAN THE DREAT CANE



STATE OF MICHIGAN

DEPARTMENT OF NATURAL RESOURCES

LICENSE

Under the provisions of Act 87, Public Acts of 1965, as amended,

a license to operate the Sheridan-Albion

SOLID WASTE DISPOSAL AREA

in the county of Calhoun

, State of Michigan,

is granted to Gordon D. Stevick

This license is applicable to the property located at and

described as follows: Calhoun County, Sheridan Township 2 miles east of Albion on Division Street

August 31, 19 4 subject, however, to prior revocation by the Director of the Department of Natural Resources for any violations of the rules and regulations authorized thereunder or for noncompliance of any stipulations listed below.

. Cover all refuse with at least 6 inches of compacted earth at the end of each day's operation.

Issued at the Michigan Department of Natural Resources Lansing, Michigan 48926

on September 13, 1973

License No.

2215

This livense must be available through the licensee during the entire time the disposal area is in operation. The license remains the property of the Director of the Department of Natural Resources.

STATE OF MICHIGAN

DEPARTMENT OF NATURAL RESOURCES

SOUD WASTE DISPOSAL AREALICENSE

This license is issued under the provisions of Act 80. Public Acts of 1965; as amended, to permit the operation of a solid waste disposal area in the State of Michigan. This license does not obviete the necessity of obtaining other clearances and permits as may be required by state law or local ordinance. It is further made acondition of this license that the applicant give notice to public utilities in accordance with Act No. 53 of the Public Acts of 1974; being sections 460.701 to 460.718 of the Michigan Compiled Laws, and comply with each of the requirements of that Act. This facility shall not receive liquid wastes without special approval from the health department having jurisdiction or this office.

GRANTED TO: Gordon Stevick

ISSUE DATE: 10-30-74

This license is applicable to the facility located at and described as follows:

5 acres in Sheridan Township

Stipulations:

- 1. All refuse must be spread, compacted and govered at the
- 2. Continue to move salvage material on a periodic basis to prevent unsightliness or insect and redent barborage.

COUNTY: Calhoun

Gordén Stevick Lot 1 Crystal Lake

Cement City, MI 49233

This license is subject to revocation by the Director of the Department of Natural Resources for any violation of the law under which it is issued or for any violation of the rules authorized thereunder, or any stipulations noted. This license shall be available through the licensee during the entire effective date and remains the property of the Director of the Department of Natural Resources. THIS LICENSE IS NOT TRANSFERABLE.

CRCUMBUIC

LICENSE NO. 333

Deputy Director

STATE OF MICHIGAN

DEPARTMENT OF NATURAL RESOURCES

SHERIDAN-ALBIOH LANDTILL

SOLID WASTE DISPOSAL AREA LICENSE

This license is issued under the provisions of Act 87, Public Acts of 1865, as amended, to permit the operation of a solid waste disposal area in the State of Michigan. This license does not obviate the necessity of obtaining other releasances and permits as may be required by state law or local ordinance. It is further made a condition of this license that the applicant give notice to public utilities in accordance with Act No. 53 of the Public Acts of 1974, being sections 460,701 to 460,718 of the Michigan Compiled Laws, and comply with each of the requirements of that Act. This facility shall not receive liquid wastes without special approval from the health department having jurisdiction or this office.

GRANTED TO: Gordon D. Stevick

ISSUE DATE: October 23, 1975 EXPIRATION DATE: September

This license is applicable to the facility jocated at and described as follows:

5 acres - Sheridan Township, 2 miles onet of lib

Stipulations:

1 1976

Gordon D. Stevick

Crystal Lake

Coment City, MI 49233

1. Cover desolition material me directed by the Calhoun County lighth Department.

STOWERIS PENINSULAM AUMOENEM

This license is subject to revocation by the Director of the Department of Natural Resources for any violation of the law under which it is issued or for any violation of the rules authorized thereunder, or any stipulations noted. This license shall be available through the licenses during the entire effective date and remains the property of the Director of the Department of Natural Resources. THIS LICENSE IS NOT TRANSFERABLE.

LICENSE NO.

Deputy Director

STATE OF MICHIGAN DEPARTMENT OF NATURAL RESOURCES

SOUD WASTE DISPOSAL AREA LICENSE

This license is issued under the provisions of Act 87, Public Acts of 1965 as emended to permit the operation of a solid waste disposal control of the first and permits as may be required by the notice to public utilities in accordance State lew or local ordinance. It is further made a condition of this license that the applicant give notice to public utilities in accordance with Act No. 53 of the Public Acts of 1974, being sections 460 701 to 460 718 of the Michigan Compiled Laws, and comply with each of the Act. This facility shall not receive liquid wastes without special approval from the health department having ISSUE DATE: October 15, 1976

This license is applicable to the facility located at and described

acres - East Erie Road, Sharidan Comphip 3 miles east of Albion on Brie Stipulations:

Cover demolition material as directed by the

Mr. Gozdon D Lot #1

L COUNTY:

CEYPERL

OUTERIS PENINSULAM AMOUNT

CARCUM

This license is subject to revocation by the Director of the Department of Natural Resources for any violation of the law under which it is issued or for any violation of the rules.

This license is subject to revocation by the Director of the Department of Natural Resources for any violation of the law under which it is issued or for any violation of the rules. This license is subject to revocation by the Director of the Department of Natural Resources for any violation of the law under which it is issued or for any violation or the rules.

This license shall be available through the license suring the entire effective date and remains the property of the Director of the

STATE OF MICHIGAN

DEPARTMENT OF NATURAL RESOURCES

ALBION-SPERIDAR TOPISHIP LANDELL

SOLID WASTE DISPOSAL AREA LICENSE

This license is issued under the provisions of Acr 87. Public Acrs of 1965, as amended to permit the operation of a solid waste disposal area in the State of Michigan. This license does not obviete the necessity of obtaining other clearances and permits as may be required by state law or local ordinance. It is further made a condition of this license that the applicant give notice to public utilities in accordance with Act No. 53 of the Public Acts of 1974; being sections 460.701 to 460.718 of the Michigan Compiled Laws, and comply with each of the requirements of that Act. This facility shall not receive liquid wastes without special approval from the health department having jurisdiction or this office.

GRANTED TO: Gordon Stavick

ISSUE DATE: October 27, 1977

This license is applicable to the facility located at and as follows:

5 acres - Brie Road, Sheridan Township

Stipulations: 3

Cover demolition material as directed Health Department.

Gordon Stevick Tratal Lake ent City, MI 49233

the County STOUERIS PENINSULAM AMO

CINCOMOR

This license is subject to represent the Director of the Department of Natural Resources for any violation of the law under which it is issued or for any violation of the rules authorized thereunder, or any appulations noted. This license shall be eveilable through the licenses during the entire effective dute and remains the expectly of the Diseasor of the Department of Netural Resources, THIS LICENSE IS NOT TRANSFERABLE.

Jouan a Yan DIRECTOR

THE ÆTNA CASUALTY AND SURETY COMPANY

HARTFORD, CONNECTICUT 06115

Continuation Certificate-Fidelity or Surety Bonds

| In Consideration of Treaty Pive and no/ | 100(\$25.00) Dollars-rénewal premium, |
|---|---|
| the term of Bond No24 S. 12776 BC in the | amount of \$ 2,500. issued 5-5-66 |
| on behalf of Ourden Staylek | |
| in favor of Birester of the Dept. of P | ublic Health on behalf of the State of Michigan |
| is hereby extended to | subject to all the covenants and conditions of said bond. |
| The aggregate liability of the company under the said b | the bond. It does not increase the amount which may be payable thereunder. cond together with this certificate shall be exactly the same as, and no greater been written to expire on the date to which it is now being extended. |
| Signed, sealed and dated (enter below) | THE ÆTNA CASUALTY AND SURETY COMPANY |
| July 12, 1966 | |
| | By: |

(F-58-H) 1-65

THE ÆTNÆASUALTY AND SURETY OMPANY

HARTFORD, CONNECTICUT 06115

| | Conti | nuation | Certificat | e—Fidelity or | Surety Bonds | | | |
|---------------------|--------------------------------|-----------------------------|-----------------|-------------------------------|---------------------|---|----------------------------|--|
| • | | | | | | - Della | | |
| In Consideration of | Twenty-five an | d_no/.1 | .00(.\$2; | 5.00) | | | us renewal premi | ~ |
| | 1 ₀ . 24 S 12776 B | a . | .1 | | 70 is | sued May | 5 1966 - | |
| the term of Bond N | 10 | ki in 1 | the amount | ره در در و در و Or به Or و Or | ∠ × Lo | | | ====================================== |
| | rdon Stevick - | .Ta | keon. I | Michigan | | | 1. | ا با |
| | | | | | _ | | 별 그 탕 | <u> </u> |
| in force of Di | rector of the I | eparti | ment_of. | Public Hea | 1th - State | of Michi | gan | <u>~</u> |
| | | | | | | | | x : |
| is hereby extended | toAugust 31, | 1969 | | su b | ject to all the co | venants and co | nditions of said b | ond. |
| | | | | | • | | | 2 ← 1 |
| This certificate i | s designed to extend onl | y the life | of the bon | d. It does not inc | rease the amoun | t which may t | e payable thereus | nder. |
| The amount tick | ilier of the company unc | ler the sa | id bond to | ether with this o | ertificate shall be | exactly the sa | me as, and no Br | Cattl |
| than it would have | been, if the said bond h | ad origin | ally been w | ritten to expire o | in the date to wi | nich it is now i | senig extended. | |
| 1 | termination and | مر دی _{گری} ۱۸۱ | | ie ætna cas | TIALTY AND | SURETY C | OMPANY | |
| Signed, sealed and | Bated Center below CT | 14 19 | 00 117 | E AETHA PA | - 01 | , | | ٠. |
| . 1 | | <u> </u> | • | 7/4-9 | \mathcal{F}' | | | |
| July 10, \196 | 20. | | Bv: | -T/1. C | · Va | rnel | | |
| \ (| 1 XX | | ٠,٠ | M. E.Fosne | er, Attorr | ey-in-Fac | t | • . |
| · L | | | | | - | | | |
| (F-58-H) 10-65 | • | | | | | | • • • | • |
| h-20-11 10-03 | | | | | | | | |
| | | | | | | | | |
| | | | | | | | | |
| | | | Q# | L & 9 | Emmode | On a | | 302 |
| DAT | , | . . | | | 0 | | | |
| | August 31, 19 | 58 | • | COMPLETE INS | URANCE SERV | /ICE | You | 7. 2 |
| | 104-8599 | | 110 Fi | | ackson, Michi | gan 49201 | [RSHTER PRANTI | AGENT |
| | , 204 0),, | | | Phone: | 789-6151 | | 1 | • |
| | | | | \neg | | | | |
| | Gordon Stevic | k | | | | | | |
| | 424 Pattie Av | enue | | | | | | |
| | Jackson, Mich | igan 4 | 9202 | | | | • | |
| | • | | | • | | | | |
| | *: | | | | | | RETURN THIS N TO INSURE | \$ <u> </u> |
| | | | 100 | DA SAU TOS | i. (Bar) T. June | | DIT. THANK YOU. | Payment Enclosed |
| AGE | NT | ,, | MORIG | icle. | | 1 | | |
| Co.t | 10. POLICY PERIOD | C&T | | OLICE NO, & DESC | IPPON | | TEMIUM | BALANCE |
| _ | | | | Company to the last | distribution of the | CHARGE | CREDIT | |
| | | [[| | | •. | Į. | | 4.5 |
| 3 | 5 8/31/68-69 | 70-2 | 24\$127 | 76BC - Lice | ense Bond - | \$25.00 | | \$25.00 |
| | | | Dept. | of Public I | lealth | } | | |
| A | etna | | State | of Michigan | ı | | anin | |
| | | | | | | 1 | MODID | |
| | _ | | | | | I | クラフィ | X 1\ |
| | FUTURE | $\overline{}$ | DATE | PREMIUM | DATE | PREMIUM | DATE | PREMIUM |
| | INSTALLMENTS ARE DUE & PAYABLE | | HELL & KENTIEDY | | DV | | | |
| | DUE & FATABLE | | | | <u> </u> | | mil! | yore |
| | | D., | <u></u> | Davah | le on Effective | Datas of D | Lian / | |

Pléase Remit From Invoice-No Statement Will Be Sent Unless Réquésted.

THE ÆTNÆCASUALTY AND SURETY OMPANY

HARTFORD, CONNECTICUT 06115

Continuation Certificate—Fidelity or Surety Bonds

| In Consideration ofTwenty-five and no/100 (\$25.00) |
|--|
| the term of Bond No. 24 S 12776 BC in the amount of \$ 2,500.00 issued May 5, 1966 |
| on behalf of Gordon Stevick- Jackson, Michigan |
| in favor of Director of the Department of Public Health - State of Michigan |
| is hereby extended to August 31, 1970 subject to all the covenants and conditions of said bond. |
| This certificate is designed to extend only the life of the bond. It does not increase the amount which may be payable thereunder. The aggregate liability of the company under the said bond together with this certificate shall be exactly the same as, and no greater than it would have been, if the said bond had originally been written to expire on the date to which it is now being extended. |
| Signed, sealed and dated (enter below) THE AETNA CASUALTY AND SURETY COMPANY |
| June 27, Michigan By: A Company of the Company of the D. Schaefer, Jr., Attorney-in-Fact |

THE ÆTN CASUALTY AND SURETY OMPANY

HARTFORD, CONNECTICUT 06115

Continuation Certificate—Fidelity or Surety Bonds

| In Consideration of Twenty-five and No | o/100 (\$25 . 00) | Dollars renewal premium, |
|--|--|---|
| the term of Bond No. 24 S 12776 BC | in the amount of \$ 2,500. | issued May 5, 1966 |
| on behalf of Gordon Stevick - Jack | son, Michigan | |
| in favor of Director of Department | of Public Health - State | e of Michigan |
| is hereby extended to August 31, 1971 | subject to | all the covenants and conditions of said bond. |
| This certificate is designed to extend only the li The aggregate liability of the company under the than it would have been, if the said bond had orig | said bond together with this certifica | te shall be exactly the same as, and no greater |
| Signed, sealed and dated (enter below) June: 24, 1970 | /// / | Jr., Attorney-In-Fact |
| (F-58-H) 10-65 | | / / |



CONTINUATION CERTIFICATE FIDELITY R SURETY BONDS

THE ÆTNA CASUALTY AND SURETY COMPANY Hartford, Connecticut 06115

| n Consideration of | Twenty-five and No/100 | (\$25 m) | Dollars renewal premium. |
|-----------------------|------------------------|---------------------|--------------------------|
| an Compared annous of | INGULVATIVE SOO NOTICE | 132/5 [8] = = = = = | Dollars renewal premium. |

PER SECRETARIAN SE

the term of Bond No. 24 S 255 BCA in the amount of \$ 2,500.

issued May 5, 1966

on behalf of GORDON STEVICK - Jackson, Michigan

in favor of Director of Dept. of Public Health - Michigan

is hereby extended to August 31, 1972 subject to all the covenants and conditions of said bond.

This certificate is designed to extend only the life of the bond. It does not increase the amount which may be payable thereunder. The aggregate liability of the Company under the said bond together with this certificate shall be exactly the same as, and no greater than it would have been, if the said bond had originally been written to expire on the date to which it is now being extended.

Signed, sealed and dated (enter below)

August 5, 1971

(F-58-K) 3-68

THE ÆTNA, CASUALTY, AND SURETY COMPANY

By H Scheefer Jr

PRINTED IN U.S.A.

INSURED/OBLIGEE COPY



THE ÆTNA ^ SUALTY AND SURETY COMPANY Hartford, Connecticut 06115

In Consideration of Twenty-five and No/100 (\$25.00) ---- Dollars renewal premium,

the term of Bond No. 24 S 255 BCA

in the amount of \$ 2,500.00

issued May 5, 1966

on behalf of

GORDON STEVICK - INCX Jackson, Michigan

in favor of

Director of Dept. of Public Health - Lansing, Michigan

is hereby extended to

August 31, 1974

subject to all the covenants and conditions of said bond.

This certificate is designed to extend only the life of the bond. It does not increase the amount which may be payable thereunder. The aggregate liability of the Company under the said bond together with this certificate shall be exactly the same as, and no greater than it would have been, if the said bond had originally been written to expire on the date to which it is now being greended.

Signed, sealed and dated (enter below)

July 10, 1973

THE ATTNA CASHALTY AND SURETY COMPANY

(F-58-K) 3-68

PRINTED IN U.S.A.

INSURED/OBLIGEE COPY



CONTINUMATION CERTIFICATE FIDELITY . SURETY BONDS

In Consideration of Twenty Five and Ho/100 - - - - - - - Dollars renewal premium,

the term of Bond No. 24 S 255

in the amount of \$ 2,500.00

issued May 5, 1966

on behalf of QORDON STEVICK, Coment City, Michigan

in favor of

Michigan Department of Natural Resources, Lansing, HI.

is hereby extended to

August 31, 1976

subject to all the covenants and conditions of said bond.

This certificate is designed to extend only the life of the bond. It does not increase the amount which may be payable thereunder. The aggregate liability of the Company under the said bond together with this certificate shall be exactly the same as, and no greater than it would have been, if the said bond had originally been written to expire on the date to which it is now being extended.

Signed, sealed and dated (enter below)

July 14, 1975

THE ÆTNA CASUALTY AND SURETY COMPANY

H. D. Schaefer

Attorney-in-Fact

(F-58-K) 3-68

PRINTED IN U.S.A.

PRODUCER'S COPY

| | • | | | |
|--|--|--|--|--|
| | y Landfill Sheridan Twp. | Oddan of Allica | | |
| | of Disposal Area) | City of Albion (County or Ci | ty) | (Bond Number) |
| KNOW ALL | MEN BY THESE PRESENTS: | , , | | |
| That | Gordon Stevick | , of <u>424 Pa</u> | attie Avenue, Jacks eet Address & City) | on, Michigan |
| • | | | | Migal |
| as princ | ipal, and <u>The Aetna Ca</u> | sualty and Surety | Company, Hartior | , Connecticut |
| of Michi of the S States o which pa | er authorized to transact gan are firmly bound unto tate of Michigan in the s f America, to be paid to yment well and truly to b nd each and every one of | the Director of the sum of * \$2,500 the said Director, be made, we bind our | his successor or s | olic Health on behalf ful money of the United uccessors in office, to |
| Sealed w | ith our seals, dated the | 5th day of | May , A.1 | o., 19 <u>66</u> . |
| conduct | the principal has made a a solid waste disposal an ns of Act 87 of the Publi | ea within the State | | |
| Now ther shall: | efore, the condition of t | chis obligation is s | such that if the ab | ove bounden principal |
| 2.3.then thi | Faithfully perform all a Faithfully comply with a under the provisions of Faithfully comply with a license is issued, sobligation shall be void is further executed and This bond shall be in foof the license and ending bond shall remain in fullicense renewal is approportionation or extension cover renewal license of the state of the license of the license and ending bond shall remain in fullicense renewal is approportional. | the applicable rules Act 87 of the Publiche provisions of an id, otherwise it shall accepted subject to prove for a period being on August 31 next all force and effect oved or denied. The proved or denied signs are to prove the provesses of the provesses are the province and the provesses are the province are t | s on solid waste di ic Acts of 1965, an my stipulations und all remain in full to the following co eginning with the d t following: excep until the applicat is bond may be exte | sposal promulgated d er which the force and effect. nditions and limitations: ate of issue t that this ion for nded by |
| Surety h | SS WHEREOF, The principal erein has caused this borotate seal affixed and judges ove written. | nd to be signed by | its officers proper er of attorney atta | for the purpose and ched the day and date |
| | ma Kackey | nainal | GORDON STEVICE | |
| withe | sses to signature of pri | пстрат | Principal | |
| | | Т | HE AETNA CASUALTY | AND SURETY COMPANY |
| | | | Surety | |
| • | | | • | |

* \$500/acre, minimum \$2,500 D 65.4 1/66

Authorized Agent and attorney-in-fact Mary B. Smith

SURETY TND - FORM FOR SOLID WASTE DISP(. LICENSE

| | Calhoun County | |
|---|---|---|
| Sheridan-Albion (Name of Disposal Area) | (County or City) | 24S12776BC (Bond Number) |
| KNOW ALL MEN BY THESE PRESENTS: | (| , , |
| That Gordon Stevick | , of Lo | t 1, Crystal Lake, Cement City, |
| nac | , 01 | (Street Address & City) |
| as principal, andThe Aetn | a Casualty and Surety Co | ompany |
| of Michigan are firmly bound unt of the State of Michigan in the States of America, to be paid to | o the Director of the Desum of * \$2,500.00 the said Director, his be made, we bind oursely | and fidelity insurance in the State epartment of Public Health on behalf ———————————————————————————————————— |
| Sealed with our seals, dated the | 31st day of August | , A.D., 19 <u>72</u> . |
| | rea within the State of | se to establish, maintain, and/or Michigan in accordance with the nded. |
| Now therefore, the condition of shall: | this obligation is such | that if the above bounden principal |
| Faithfully perform all | the provisions of Act 87 | 7 of the Public Acts of 1965, as amend |
| the provisions of Act 8 3. Faithfully comply with | 7 of the Public Acts of | solid waste disposal promulgated unde 1965, as amended, and tipulations under which the license is |
| This bond shall be in force and ending August 31 next f shall remain in full force approved or denied, and fur and effect for a maintenance bond may be extended by consurety to cover renewal lice | epted subject to the for a period beginning ollowing, except that the appetract and effect until the appetract bonds for sanitary e period of two years artinuation or extension ense or licenses. On the alth, that any of the formation of the formatical than the formation of the | remain in full force and effect. This llowing conditions and limitations: with the date of issue of the license he annual bonds for sanitary landfills plication for license renewal is landfills shall remain in full force fter the landfill is completed. This certificate signed by principal and he determination of the Director of oregoing conditions have not been s created under the bond. |
| herein has caused this bond to b | e signed by its officer | ffixed his hand and seal and the Sure s proper for the purpose and its corpo attached the day and date first above |
| Jana C Sus | leur St- | Start 1 |
| Mary B Smith | Gordon | Stevick |
| (Witnesses to signature of prin | cipal) | (Principal) |
| | THE AET | NA CASUALTY AND SURETY COMPANY (Surety) |
| | Vera | L. Ludwig, Attorney-in-fact |

*\$500/acre, minimum \$2,500 for landfills (Authorized agent and attorney-in-fact)
1/4 of 1% of facility construction cost for other disposal areas - minimum \$2,800

Michigan Department of Natural Resources SURETY BOND FORM FOR Environmental Protection Bran SOLID WASTE DISPOSAL LICENSE Division of Solid Waste Management Sanitary Landfill 24S255BCA Lot 28, Sheridan Twp. City of Albion (County or City) (Name of Disposal Area) (Bond Number) KNOW ALL MEN BY THESE PRESENTS: Gordon Stevick , of Lot 1, Crystal Lake, Cement City, Mich. That (Street Address & City) 49233 as principal, and The Aetna Casualty and Surety Company - Hartford, Connecticut, an insurer authorized to transact the business of surety and fidelity insurance in the State of Michigan are firmly bound unto the Director of the Department of Natural Resources on behalf of the State of Michigan in the sum of * \$2,500.00 lawful money of the United States of America, to be paid to the said Director, his successor or successors in office, to which payment well and truly to be made, we bind ourselves, our executors, administrators and heirs, and each and every one of them firmly by these presents. Sealed with our seals, dated the 5th day of September , A.D., 19 74 . Whereas, the principal has made application for a license to establish, maintain, and/or conduct a solid waste disposal area within the State of Michigan in accordance with the provisions of Act 87 of the Public Acts of 1965, as amended. Now therefore, the condition of this obligation is such that if the above bounden principal shall: 1. Faithfully perform all the provisions of Act 87 of the Public Acts of 1965, as amended, 2. Faithfully comply with the applicable rules on solid waste disposal promulgated under the provisions of Act 87 of the Public Acts of 1965, as amended, and 3. Faithfully comply with the provisions of any stipulations under which the license is issued. then this obligation shall be void, otherwise it shall remain in full force and effect. This bond is further executed and accepted subject to the following conditions and limitations: This bond shall be in force for a period beginning with the date of issue of the license and ending August 31 next following, except that the annual bonds for sanitary landfills shall remain in full force and effect until the application for license renewal is approved or denied, and further bonds for sanitary landfills shall remain in full force and effect for a maintenance period of two years after the landfill is completed. This bond may be extended by continuation or extension certificate signed by principal and surety to cover renewal license or licenses. On the determination of the Director of the Department of Natural Resources that any of the foregoing conditions have not been complied with, he shall have recourse to the rights created under the bond. IN WITNESS WHEREOF. The principal herein has hereunto affixed his hand and seal and the Surety herein has caused this bond to be signed by its officers proper for the purpose and its corporate seal affixed and justification or power of attorney attached the day and date first above written. GORDON STEVICK Witnesses to signature of principal (Principal) THE AETNA CASUALTY AND SURETY COMPANY

*\$500/acre, minimum \$2,500 for landfills (Authorized agent and attorney-in-fact)

(Surety)

.: Michigan Department of Natural Resources SURETY BOND FORM FOR Environmental Protection Bra-SOLID WASTE DISPOSAL LICENSE Division of Solid Waste Manas, ent Sanitary Landfill City of Albion Lot 28, Sheridan Twp. 24 S 255 BCA (Name of Disposal Area) (County or City) (Bond Number) KNOW ALL MEN BY THESE PRESENTS: That Gordon Stevick , of Lot 1, Crystal Lake, Cement City, MI, L9233 (Street Address & City) as principal, and THE ETNA CASUALTY AND SURETY COMPANY - Hartford, Connecticut an insurer authorized to transact the business of surety and fidelity insurance in the State of Michigan are firmly bound unto the Director of the Department of Natural Resources on behalof the State of Michigan in the sum of * \$2,500.00 lawful money of the Unite States of America, to be paid to the said Director, his successor or successors in office, to which payment well and truly to be made, we bind ourselves, our executors, administrators and heirs, and each and every one of them firmly by these presents. Sealed with our seals, dated the 25th day of August , A.D., 19 78 . Whereas, the principal has made application for a license to establish, maintain, and/or conduct a solid waste disposal area within the State of Michigan in accordance with the provisions of Act 87 of the Public Acts of 1965, as amended. Now therefore, the condition of this obligation is such that if the above bounden principal shall: 1. Faithfully perform all the provisions of Act 87 of the Public Acts of 1965, as amende 2. Faithfully comply with the applicable rules on solid waste disposal promulgated under the provisions of Act 87 of the Public Acts of 1965, as amended, and Faithfully comply with the provisions of any stipulations under which the license is issued. then this obligation shall be void, otherwise it shall remain in full force and effect. This bond is further executed and accepted subject to the following conditions and limitations: This bond shall be in force for a period beginning with the date of issue of the license and ending August 31 next following, except that the annual bonds for sanitary landfills shall remain in full force and effect until the application for license renewal is approved or denied, and further bonds for sanitary landfills shall remain in full force and effect for a maintenance period of two years after the landfill is completed. This bond may be extended by continuation or extension certificate signed by principal and surety to cover renewal license or licenses. On the determination of the Director of the Department of Natural Resources that any of the foregoing conditions have not been complied with, he shall have recourse to the rights created under the bond. IN WITNESS WHEREOF, The principal herein has hereunto affixed his hand and seal and the Surety herein has caused this bond to be signed by its officers proper for the purpose and its corpor ate seal affixed and justification or power of attorney attached the day and date first above written. GORDON STEVICK Moluni Darron (Witnesses to signature of principal) THE TIMA CASUALTY AND SURETY COMPANY (Surety)

*\$5500/acre, minimum \$2,500 for landfills (Authorized agent and attorney-in-fact)

1/4 of 1% of facility construction cost for other disposal areas - minimum \$2,500

funk

307 Colheun Co. Albion-Sheridan L.F. Shay Montgomeny

POTENTIAL GROUND WATER CONTAMINATION SOURCE

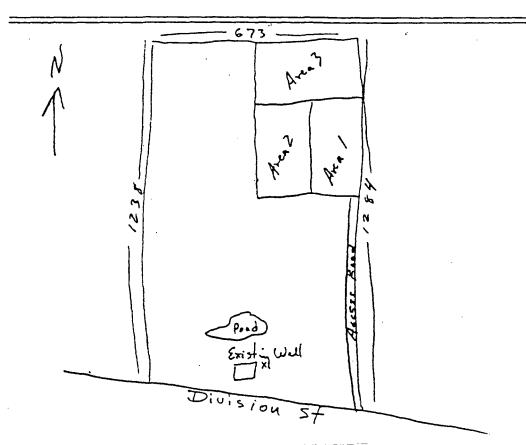
IDENTIFICATION AND PRELIMINARY ASSESSMENT

This form is completed for each potential hazardous waste site to help set priorities for site inspections. The information submitted on this form is based on available records and may be updated on subsequent forms as a result of additional inquiries and on-site inspections. If information is not available, place an "x" in the space provided.

| not available, place | not available, place an "x" in the space provided. | | | |
|---|--|--------------------|---------------------|--------------------|
| SITE IDENTIFICATION | SITE IDENTIFICATION | | | |
| COMPANY NAME AL | bion-Sheric | lan Tup La | 1£:1/ | |
| | | Į. | (2 miles east . | 1 Albion) |
| | | | 6 T25, R4W, | • |
| OWNER/OPERATOR | Gordon St | Levick / G | ordon Stewick | Calhoun Co. |
| • | | , | SITE? Licensed Ju | |
| HAS THERE EVER BEE | EN AN OWNERSHIP T | RANSFER? | ס | |
| IF SO WHEN? | | | | • |
| PREVIOUS OWNE | | | | |
| | | | | |
| OPERATION CHARACTE | | | | |
| TYPE OF OPERATION | (I.E. MANUFACTUR | RING, LANDFILL, ET | (C.) <u>Landf./</u> | <u>//</u> |
| | | | | |
| WASTE CHARACTERIZA | NOITA | | | - |
| Waste type: | | | | |
| Unknown | Liquid | Solid | X Sludge | Gas |
| Waste characterist | tics: | | | |
| Unknown | Corrosive | Ignitable | Radioactive | Highly Volatile |
| | Toxic | Reactive | Inert | Flamable |
| | Other Specif | y | | |
| Waste description (metal sludges, pc8's, etc.) metallic sludges (as | | | | |
| | | | 3) + Hinner of | 9 |

DEPARTMENT ACTION

| HISTORY OF SITE INSPECTIONS (LIST DATE, INSPECTING AGENCY & RESULTS) |
|---|
| Total of 63 site in spections by Calhon Co H.D. & DNR |
| |
| |
| REGULATORY ACTIONS (NOTICES OF NONCOMPLIANCE & VIOLATIONS, DATES & REASONS) |
| 3-28-73 - Informal heaving @ County Health Dept. |
| |
| Most site inspections contained areas of noncompliance |
| REMEDIAL ACTIONS REQUESTED (ACTIONS & DATES) |
| DNR 10-4-78 Request for higher study & engineering plans |
| DNR 11-21-79 Request for hydro study |
| Were these actions accomplished? |
| |
| |



| | Case name Albion-Sheridan Canlfill |
|---|--|
| PRELIMINARY PROBLEM ASSESSMENT | Date |
| POTENTIAL HAZARDS (CHECK ALL APPLICABLE | CATEGORIES) |
| Human health | Noticeable odors |
| Contamination of water supply | Contamination of soils |
| Contamination of groundwater Suspect | Property damage |
| | Sewer/storm drain problems |
| Contamination of surface water | Erosion problems |
| Contamination of food chain | Inadequate security |
| Damage to flora/fauna | Other (specify) |
| Fish kill | |
| Contamination of air | |
| Fire or explosion | |
| Spills/leaking containers (runoff) standing liquids | |
| Incompatible wastes | |
| Midnight dumping | |
| WHAT ADDITIONAL INFORMATION IS REQUIRE | D? |
| | |
| | |
| | HOULD BE UNDERTAKEN? (ADDITIONAL SAMPLING, |
| SITE INSPECTION, ETC.) hadro sum | en needs to be conducted on |
| this site to determine | e if groundwater contamination |
| The occurred. | |
| | J |

| SUMMARY OF ACTIONABLE VIOLATIONS | Case Name | | |
|---|---|--|--|
| The following is a list of violations we development of enforcement strategy. It categories: 1. Operation without a perfinal order, consent agreement etc. Producing the course of your review. | The violations fall into two basic ermit or 2. violation of a permit, | | |
| Violation of Act 245, P.A. 1929, the | No permit | | |
| Water Rescurces Commission Act (discharge violation) | Violation of permit | | |
| | Surface water discharge | | |
| | Groundwater discharge | | |
| | · | | |
| Violation of Part 5 Rules for | Illegal storage | | |
| Act 245, P.A. 1929 | Improper storage | | |
| | No PIPP | | |
| • | PIPP not implemented correctly | | |
| Violation of Act 641, P.A. 1978, the | No license | | |

Other violations (failure to report critical materials, improper disposal of PCB's, illegal waste removal, etc.)

Violation of license_____

No Actionable Violation

Solid Waste Management Act

MICHA DEPT OF HEALTH TANISON TO Trer a I Vail

ENGINEERING DIVISION

March 16, 1973

100 Carlyle St. Battle Creek; MI 49014

Mr. Gordon Stevick
Lot 11, Crystal Lake
Cement City, MI 19233

Dear Mr. Stevick:

This letter will serve as notice of an informal hearing at the Calhoun County Health Department, Battle Creek Office, with you, Mr. Phil Kirkwood and myself on March 28, 1973 at 9:30 R. M.

This hearing was arranged in order to discuss with you the existing problems pertaining to the operation of the Albion-Sheridan landfill, to set a date for total compliance with Act 87 P. A. of 1965 as amended, and to bring to your attention that if no action is taken on your part by an agreed time, arrangement will be made for an administrative review of your license at the Michigan Department of Public Health in Lansing to determine the future of your landfill.

If you have any questions, please contact our office.

Very truly Yours,

PHIL B. KIRKWOOD, JR., DIR. ENVIRONMENTAL HEALTH DIVISION

Ted R. Havens Registered Sanitarian

TRH.jd Oci Len Kulevski/ MDPH



July 1, 1980

nvironmental Health Services

ablic Health Nursing Services

inical Services

icohol Abuse Services

ecupational Health Services

lcohol Highway Safety Project

onitoring and Inspection Services Gordon D. Stevick, Owner Sheridan-Albion Landfill Lot # 1, Crystal Lake Cement City, Michigan 49233

RE: SHERIDAN-ALBION LANDFILL LICENSE

Dear Gordon,

Enclosed please find a copy of the memo we received from Terry Hartman, our regional representative for the Michigan Department of Natural Resources (MDNR). As you can see from his memo, the MDNR has been unable to process your license application due to the lack of sufficient bonding as required under Act 641, P.A. 1978.

Therefore, we ask that you secure the necessary bond and return it with the attached license application, restrictive deed covenant, etc. This should be done within thirty (30) days of the date of this letter.

If you have any questions, please contact me at your earliest convenience.

Very truly yours,

TED R. HAVENS, R.S., DIRECTOR ENVIRONMENTAL HEALTH DIVISION

Kenneth W. Matveia, II Registered Sanitarian

KM:jlc
cc: Terry Hartman
enclosure



January 18, 1980

vironmental Health

blic Health Nursing

nical Services

ohol Abuse Services

cupational Health Services

ohol Highway Safety Project

nitoring and nspection Services

TO: Elain Brown and Gordon Stevick

FROM: Ken Matveia Kwm

RE: Meeting held January 10, 1980 (1:30 p.m.) to discuss requirements for continued operation of

Albion-Sheridan Sanitary Landfill

People Present: Earl Latimer, Hien Nguyen, De Montgomery, and Elaine Brown, all representing MDNR; Gordon Stevick, owner of Albion-Sheridan Landfill, and myself.

After much discussion of soil conditions, water table and bedrock elevations, the following schedule of compliance was agreed to:

March, 1980 - Work contracted out.
May 1, 1980 - Well driller retained.

June 30, 1980 - Water wells installed and elevat-

ions determined.

July 15, 1980 - Submittal of well logs, and report

covering points discussed to MDNR and the Calhoun County Health

Department. Annual testing of water

quality to be complete.

It was agreed that Albion-Sheridan Landfill would be allowed to operate until April 1, 1981 provided water quality was within acceptable limits.

jlc

AFFIDAVIT OF KEITH V. KONNIE

- 1. I, Keith V. Konnie, am an employee of the Dykema Gossett law firm.
- 2. I am employed as an environmental investigator and hold a private investigator's license in the State of Michigan.
- 3. On October 19, 1988, I contacted Gordon Stevick who lived at 11361 Crystal Lake, Bundy Hill, Michigan. Mr. Stevick owned and operated the Albion/Sheridan Township Landfill for fifteen (15) years. I made this telephone contact pursuant to direction from counsel on behalf of Hayes-Albion Corporation.
- 4. Mr. Stevick stated that he owned and operated the site for the 15 years it existed. He was at the site on a daily basis. He described the site as a small operation consisting of 2 or 3 acres of land. The majority of waste was municipal refuse from Parma and Sheridan Township residents. To the best of his recollection, the site was closed in 1980.
- 5. The operation was run out of the witnesses' home. He denied the existence of any paperwork produced during the course of business that would identify generators at the site. He repeatedly stated that this was a small operation and that he was not required to keep such paperwork.
- 6. Regarding the drums on the property in 1988, Mr. Stevick stated that he had no knowledge who dumped them at the

site. He stated that he did not bury them and that they are still at their original location. He does not recall any other shipments consisting of drums.

7. I have made this Affidavit on personal knowledge and could testify regarding its contents in a court of law.

Keith V. Konnie

STATE OF MICHIGAN)

COUNTY OF WAYNE)

The foregoing instrument was acknowledged before me this ASH day of April, 1990 by Keith V. Konnie.

Notary Public, Wayne County, Michigan

My Commission Expires: 12-192

5333

JOAN M. CORBIT-Notary Public, Macomb County, Michigan Acting in Wayne County My Commission Expires December 1, 1992

HSM-5J

Mr. Austin O. Lincoln Supervisor, Township of Concord 16118 Schultz Road Albion, Michigan 49224

> RE: Albion-Sheridan Township Landfill Site, Albion, Michigan

Dear Mr. Lincoln:

This is a follow-up to our telephone conversation of October 15, 1992, regarding the former Albion-Sheridan Township Landfill site that was operated by Gordon Stevick, then Scott's Disposal.

To assist our investigation of potentially responsible parties at this site we are requesting any additional records you may have on this site that were not previously provided in your response to our request under Section 104(e) of CERCLA. These would be any records from 1981 on and including those records or agreements with Scott's Disposal at this site.

We appreciate your cooperation in this matter. Please contact me at (312) 353-8069 if should have any questions.

Sincerely yours,

Gordon W. Garcia Civil Investigator Office of Superfund

bcc Tom Marks, RPSS Kurt Lindland, ORC

Dwb 10/16/92 Note to the file:

Gordon Skrick was the landfill operator,
but owneed the land jointly with his wife.

Uah Evison 10/24/94

.

Scott's Waste Disposal
1215 Lewis St.
Jackson, Michigan
Augest 19, 1981

Augest 19, 1981

August 19, 1981

August 19, 1981

Attention Township Supervisor

We at Scott's Disposal are writing you in concern of handeling your waste meterial that you are presntly bring to Gorden Stevick's Land Fill located at 2008½ Michigan Ave. We are presntly buying such property and are proceeding to build.

Plans to Start construction were delayed till August 21 due to D.N.R.

In event that Gorden Stevick's Land Fill closing down we will provied truck roll out boxes to handel your waste needs. Intill we are ready to openat such site.

The price will be the same as your paying now. Only additional change that we are asking for is that you supply your people with stickers.

Any additional information on the stickers we will be able to supply.

If you are intersted please give us a call. 784-5402.

Thank you.

Sincerely Scott's Disposal

1-784-5402

James 444